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# U.S. BANKRUPTCY COURT ALFORNIA L DISTRICT OF CALIFORNIA INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

- 1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- 2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- 3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- 4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at VAIENCIA, California

Date: 7/6/2021

Signature of Debtor 1

Signature of Debtor 2

Fill in this information to identify your case:	
Debtor 1 Toha Games, Foosito	
First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Central District of California	
Case number 1.21-131K - 11098 VIK	Check if this is an
(If known)	amended filing
Official Form 106Sum	
Summary of Your Assets and Liabilities and Certain Statistic	al Information 12/15
Be as complete and accurate as possible. If two married people are filing together, both are equally respond information. Fill out all of your schedules first; then complete the information on this form. If you are filing your original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.  Part 1: Summarize Your Assets	onsible for supplying correct
	Your assets
1. Schedule A/B: Property (Official Form 106A/B)	Value of what you own
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i>	\$ 585,000 00
	\$ 585,000 <sup>60</sup> \$ 72.050 <sup>66</sup>
1b. Copy line 62, Total personal property, from Schedule A/B	\$ <u>/J. OSO (*</u>
1c. Copy line 63, Total of all property on Schedule A/B	\$657.050 60
	\$ <u>677.050</u>
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
<ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedul</li> </ol>	\$ 600, 718, 17
<ol> <li>Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)</li> <li>Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F</li> </ol>	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ /529,000
	0.110000.17
Your total	liabilities \$ <u>2,129,748,</u> 17
Cummada Vanda and Empana	
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I)	1741 00
Copy your combined monthly income from line 12 of Schedule I	\$ <u>6391,00</u> \$ <del>5118,49</del>
5. Schedule J: Your Expenses (Official Form 106J)	SATO 110
Copy your monthly expenses from line 22c of Schedule J	\$ <u>X18, 49</u>

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Debtor 1

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Part 4:	Answer These	Questions for	Administrative	and Statistica	l Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <i>O</i>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <i>(</i> )
9d. Student loans. (Copy line 6f.)	\$O
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$O
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$
9g. <b>Total.</b> Add lines 9a through 9f.	\$O

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M	ain Document Page 4 of 67		
Fill in this information to identify your case and thi	s filing:		
	. 1		
Debtor 1 Toha CAMFA First Name Middle Name	ESPOSITO Jast Name		
Debtor 2 (Spouse, if filing) First Name Middle Name			
United States Bankruptcy Court for the: Central District	of California		
•	or Jamornia		
Case number 121-BK - 1109&VK	·	Е	Check if this is an
		_	amended filing
Official Form 106A/B	·		
Schedule A/B: Propert	У		12/15
In each category, separately list and describe item	s List an asset only once. If an asset fits in more	than one category list	the accet in the
category where you think it fits best. Be as complete responsible for supplying correct information. If moving write your name and case number (if known). Answers	ete and accurate as possible. If two married peopl ore space is needed, attach a separate sheet to th	e are filing together, bo is form. On the top of a	oth are equally
Do you own or have any legal or equitable intere	st in any residence, building, land, or similar prop	ortu?	
□. No. Go to Part 2.	st in any residence, building, land, or similar prop	ertyr	
Yes. Where is the property?			
	What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
11 23061 STRATHENN ST.	Single-family home Duplex or multi-unit building	the amount of any secure Creditors Who Have Clair	
Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home	entire property?	portion you own?
	Land	\$ <u>450 000</u>	\$ 550 mo
hist Hills CA. GBOH	<ul><li>☐ Investment property</li><li>☐ Timeshare</li></ul>	Describe the nature of	of your ownership
City State ZIP Code	Other	interest (such as fee	simple, tenancy by
	Who has an interest in the property? Check one.	the entireties, or a life	e estate), ii known.
Los Angeles	☐ Debtor 1 only		
County	Debtor 2 only	Marian	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
	Other information you wish to add about this it	em such as local	
	property identification number:		
If you own or have more than one, list here: 別が Kukuiこかい Km 12.5	What is the property? Check all that apply.		
LT ZOWA HOTELEAR	Single-family home	Do not deduct secured cla the amount of any secure	
1.2. CATICUS AUGUSTANA POS Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clain	
	Condominium or cooperative	Current value of the	Current value of the
VISTARA CXEAN VILLAS CANCUM MEXICO TRO	■ Manufactured or mobile home     ■ Land	entire property?	portion you own?
730	investment property	\$ 3,000	\$ 8,000
City State ZIP Code	Timeshare	Describe the nature of	
2. 0000	Other	interest (such as fee the entireties, or a life	e estate), if known.
	Who has an interest in the property? Check one.		
MEXICO	Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only	M'oranie i	
	At least one of the debtors and another	Check if this is con (see instructions)	mmunity property
	Other information you wish to add about this ite	,	

property identification number: \_

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Debtor 1 John Middle Name Lest May	Case number (	if known) 1:21-BK-	11098-UK
1.3. WES FIN MISSION HALL Street address, if available, or other description 21777 Dinsh Shorts of Rancho imagn ch 912, City State ZIP Code	Land Investment property Timeshare Other	the amount of any secu Creditors Who Have Cli  Current value of the entire property?  \$ /2 000  Describe the nature	of your ownership
County	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is c (see instructions)	ommunity property
	Other information you wish to add about this ite property identification number:	em, such as local	
<ol><li>Add the dollar value of the portion you own for a you have attached for Part 1. Write that number</li></ol>	all of your entries from Part 1, including any entrie here.	s for pages ·····→	s 12000°
Part 2: Describe Your Vehicles  Do you own, lease, or have legal or equitable intere you own that someone else drives. If you lease a vehicles  Cars, vans, trucks, tractors, sport utility vehicles	le, also report it on Schedule G: Executory Contracts a	not? Include any vehicle and Unexpired Leases.	S
☐ Yes			
3.1. Make:  Model:  Year:  Approximate mileage:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any securer Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D:
Other information:	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	\$	\$
If you own or have more than one, describe here:  3.2. Make:  Model:  Year:  Approximate mileage:  Other information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured cla the amount of any secured Creditors Who Have Claim Current value of the entire property?	claims on Schedule D:
Out infination.	☐ Check if this is community property (see instructions)	\$	\$

Debtor	First Name Middle N	ame Last Na			
1.	C KAI ALA CAN.  3. LAHAINA IN AV.  Street address, if available,	or other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	Do not deduct secured cl the amount of any secure Creditors Who Have Clai	ed claims on Schedule D:
				Current value of the entire property?	Current value of the portion you own?
	VISIANT CITTO	, CILI7/3	Land	\$ 15,000	\$ 15,000
	Kranpali'	41 96761 State ZIP Cod	Investment property  Timeshare  Other	Describe the nature interest (such as fee the entireties, or a life	of your ownership simple, tenancy by
			Who has an interest in the property? Check one.		
			_ Debtor 1 only		
	County		Debtor 2 only	<b></b>	
			Debtor 1 and Debtor 2 only	Check if this is co	mmunity property
			At least one of the debtors and another	(see instructions)	<i>.</i>
			Other information you wish to add about this ite property identification number:	em, such as local	
			all of your entries from Part 1, including any entrie r here		\$ 585,000
Do you	own, lease, or have legal	or equitable inter	rest in any vehicles, whether they are registered or	not? Include any vehicles	6
you ow	own, lease, or have legal on that someone else drives.  s, vans, trucks, tractors, s	or equitable inter If you lease a vehi	rest in any vehicles, whether they are registered or icle, also report it on Schedule G: Executory Contracts es, motorcycles	<b>not?</b> Include any vehicles and Unexpired Leases.	S
Do you you ow 3. Cars	own, lease, or have legal n that someone else drives. s, vans, trucks, tractors, s No	or equitable inter If you lease a vehi port utility vehicle	icle, also report it on Schedule G: Executory Contracts es, motorcycles	and Unexpired Leases.	
Do you you owl 3. Cars	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, solo  es  Make:	or equitable inter If you lease a vehi	icle, also report it on Schedule G: Executory Contracts es, motorcycles  Who has an interest in the property? Check one.	and Unexpired Leases.  Do not deduct secured clathe amount of any securer	ims or exemptions. Put d claims on <i>Schedule D:</i>
Do you you ow 3. Cars	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, someone  ves  Make:  Model:	or equitable inter If you lease a vehi port utility vehicle	icle, also report it on Schedule G: Executory Contracts es, motorcycles  Who has an interest in the property? Check one.  Debtor 1 only	and Unexpired Leases.  Do not deduct secured cla	ims or exemptions. Put d claims on <i>Schedule D:</i>
Do you you ow 3. Cars	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, someone  des  Make:  Model:  Year:	or equitable inter If you lease a vehi port utility vehicle  Porsche 711 1973	icle, also report it on Schedule G: Executory Contracts es, motorcycles  Who has an interest in the property? Check one.	and Unexpired Leases.  Do not deduct secured clathe amount of any secured Creditors Who Have Clain  Current value of the	ims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. <b>Current value of the</b>
Do you you ow 3. Cars	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, someone  des  Make:  Model:  Year:	or equitable inter If you lease a vehi port utility vehicle	icle, also report it on Schedule G: Executory Contracts es, motorcycles  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	and Unexpired Leases,  Do not deduct secured cla the amount of any securec Creditors Who Have Clain	ims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
Do you you ow 3. Cars	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, someone  des  Make:  Model:  Year:	or equitable inter If you lease a vehi port utility vehicle  Porsche 711 1973	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	and Unexpired Leases.  Do not deduct secured clathe amount of any secured Creditors Who Have Clain  Current value of the	ims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. <b>Current value of the</b>
Do you you own	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, someone else drives.  Make:  Model:  Year:  Approximate mileage:	or equitable inter If you lease a vehi port utility vehicle Porsche 911 1973 5000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?	ims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property. <b>Current value of the</b>
Do you you own	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, someone else drives.  Moves  Make:  Model:  Year:  Approximate mileage:  Other information:	or equitable inter If you lease a vehi port utility vehicle Porsche 911 1973 5000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property?  \$	ims or exemptions. Put It claims on <i>Schedule D:</i> Its Secured by Property.  Current value of the portion you own?
Do you you own 3. Cars 3.1.	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, someone else drives.  s, vans, trucks, tractors, someone else drives.  Model: Year: Approximate mileage: Other information:	or equitable inter If you lease a vehi port utility vehicle Porsche 911 1973 5000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Clain  Current value of the entire property?  Do not deduct secured clathe amount of any secured the amount of any secured clathe amount of any secured.	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
Do you you own 3. Cars 3.1.	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, someone else drives.  s, vans, trucks, tractors, someone else drives.  Model:  Year:  Approximate mileage:  Other information:  I own or have more than on Make:  Model:	or equitable inter If you lease a vehi port utility vehicle Porsche 911 1973 5000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property?  \$	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
Do you you own 3. Cars 3.1.	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, s, No Yes  Make:  Model:  Year:  Approximate mileage:  Other information:  I own or have more than on Make:  Model:  Year:	or equitable inter If you lease a vehi port utility vehicle Porsche 911 1973 5000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only  Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$	ims or exemptions. Put d claims on Schedule D: as Secured by Property.  Current value of the portion you own?  \$
Do you you own 3. Cars 3.1.	own, lease, or have legal in that someone else drives.  s, vans, trucks, tractors, someone else drives.  s, vans, trucks, tractors, someone else drives.  Model:  Year:  Approximate mileage:  Other information:  I own or have more than on Make:  Model:	or equitable inter If you lease a vehi port utility vehicle Porsche 911 1973 5000	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 3 only Check if this is community property (see instructions)	Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the entire property?  \$	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$

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3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured of	claims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secur Creditors Who Have Cla	ed claims on Schedule D: lims Secured by Property.
	Year:	Debtor 2 only		• •
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	— At least one of the debtors and another	,,.	portion you offin
		☐ Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.	Do not doduct account	foliani a di man
	Model:	Debtor 1 only	Do not deduct secured c the amount of any secure	ed claims on Schedule D:
		Debtor 2 only	Creditors Who Have Cla	lms Secured by Property.
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of th
	Approximate mileage:	— At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		☐ Check if this is community property (see instructions)	\$	\$
No.	<i>ples:</i> Boats, trailers, motors, persona o	s and other recreational vehicles, other vehicles, and acces al watercraft, fishing vessels, snowmobiles, motorcycle accesso	<b>sories</b> ries	
No No 1 Ye	<i>ples:</i> Boats, trailers, motors, persona o	s and other recreational vehicles, other vehicles, and acces al watercraft, fishing vessels, snowmobiles, motorcycle accesso.  Who has an interest in the property? Check one.	ries  Do not deduct secured cla the amount of any secure	d claims on Schedule D:
No No No 1	ples: Boats, trailers, motors, persona o es Make: Model:	watercraft, fishing vessels, snowmobiles, motorcycle accesso.  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	ries  Do not deduct secured cla	d claims on Schedule D:
No Ye	ples: Boats, trailers, motors, persona es  Make:  Model:  Year:	watercraft, fishing vessels, snowmobiles, motorcycle accesso.  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	ries  Do not deduct secured classes the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property.
No Ye	ples: Boats, trailers, motors, persona o es Make: Model:	watercraft, fishing vessels, snowmobiles, motorcycle accesso.  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	ries  Do not deduct secured cla the amount of any secure	d claims on Schedule D: ns Secured by Property.
Am No Ye	ples: Boats, trailers, motors, persona es  Make:  Model:  Year:	watercraft, fishing vessels, snowmobiles, motorcycle accesso.  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property. Current value of the
No Ye	ples: Boats, trailers, motors, persona es  Make:  Model:  Year:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured cla the amount of any secure Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
Not Ye	ples: Boats, trailers, motors, personate ses  Make:  Model:  Year:  Other information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured clicate amount of any secure Creditors Who Have Clair  Current value of the entire property?	d claims on Schedule D: ms Secured by Property.  Current value of the portion you own?  \$
Nd Ye	ples: Boats, trailers, motors, personal of the ses of t	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.	Do not deduct secured class the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$  Do not deduct secured class the amount of any secured	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
Nd Ye	ples: Boats, trailers, motors, personate ses  Make: Model:  Other information:  own or have more than one, list here Make: Model:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured clicate amount of any secure Creditors Who Have Clair  Current value of the entire property?	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
Not Ye	ples: Boats, trailers, motors, personal of the ses of t	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$ Do not deduct secured class the amount of any secured Creditors Who Have Clair  Current value of the	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$ ims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the
Not Ye	ples: Boats, trailers, motors, personate ses  Make: Model:  Other information:  own or have more than one, list here Make: Model:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair  Current value of the entire property?  \$  Do not deduct secured class the amount of any secured Creditors Who Have Clair	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

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Do you own or have any legal or equitable interest in any of the following items?  6. Household goods and furnishings	<b>portio</b> Do not	ent value of the on you own? I deduct secured claims mptions.
Examples: Major appliances, furniture, linens, china, kitchenware		
Yes. Describe StoyE, MINOWAYE, TOATEN, REFRICIGENATOR	\$	30000
7. Electronics  Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
No X Yes. Describe	\$	3.00°C
8. Collectibles of value  Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No  Yes. Describe	,	
9. Equipment for sports and hobbies	\$	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments		
Yes. Describe Golf Clubs , Bicyelf. 4 Bass Quitans	\$	500°°
10. Firearms  Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No  Yes. Describe	; ; ; <b>\$</b>	
11. Clothes  Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No  No  Yes. Describe	\$	$\bigcirc$
12. Jewelry  Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver  No  Yes. Describe	\$	2∞ <sup>(x)</sup>
13. Non-farm animals  Examples: Dogs, cats, birds, horses		
Yes Describe 3 CATS	\$	0
14. Any other personal and household items you did not already list, including any health aids you did not list  No  Yes. Give specific information	\$	<u> </u>
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here	\$	1200 ao

Debtor 1

# Part 4: Describe Your Financial Assets

Do you own or have ar	ny legal or equitable interest in	any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. <b>Cash</b> <i>Examples:</i> Money yo	ou have in your wallet, in your hor	me, in a safe deposit box, and on hand when you file your petition	
No		,,	
/·		Cash:	s
and other	i, savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit unions, brokerage house nultiple accounts with the same institution, list each.	·s,
Ŭ No Yes		Institution name:	
	17.1. Checking account:	Wells FANGO	\$ 850 00
	17.2. Checking account:		_ \$
	17.3. Savings account:		_ \$
	17.4. Savings account:		- \$
	17.5. Certificates of deposit:		- \$
	17.6. Other financial account:		- \$
	17.7. Other financial account:		\$
	17.8. Other financial account:		\$
	17.9. Other financial account:		φ
			- Φ
		erage firms, money market accounts	
<b>□</b> res	Institution or issuer name:		
			_ \$
			_ \$
			Ψ
9. Non-publicly traded an LLC, partnership,	stock and interests in incorpor , and joint venture	rated and unincorporated businesses, including an interest in	
₩ No	Name of entity:	% of ownership:	
Yes. Give specific information about		%	\$
them		%	\$
		%	\$

	Rented furniture:		 \$\$
3. <b>Annuities</b> (A contract for	Other:  a periodic paymer	nt of money to you, either for life or for a number of years)	 \$
	Issuer name and d	escription:	 \$\$ \$\$

Case 1:21-bk-110  Debtor 1 First Name Middle Nam	98-VK Doc 10 File	ed 07/07/21 Entered 0 ent Page 11 of 67	7/07/21 10:05:1 	0 Desc 8/ <i>K −1/098\</i> / <i>K</i>
24. Interests in an education IRA, ii 26 U.S.C. §§ 530(b)(1), 529A(b), No Yes	and 529(b)(1).			
11	istitution name and description. S	Separately file the records of any in	terests.11 U.S.C. § 521	(c):
_				\$
				\$
				\$
25. Trusts, equitable or future inter exercisable for your benefit	ests in property (other than an	ything listed in line 1), and rights	or powers	
No				
Yes. Give specific information about them				•
				<b>D</b>
26. Patents, copyrights, trademarks  Examples: Internet domain names	s, trade secrets, and other inte s, websites, proceeds from royalt	llectual property les and licensing agreements		
No				
Yes. Give specific information about them				\$
27. Licenses, franchises, and other Examples: Building permits, exclu-		ation holdings, liquor licenses, prof	essional licenses	
No		, , , , , , , , , , , , , , , , , , ,		
Yes. Give specific information about them				\$
Money or property owed to you?				Current value of the
				portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you				
Yes. Give specific information about them, including whe	ather		Federal:	\$
you already filed the return	ns		State:	\$
and the tax years			Local:	\$
29. Family support  Examples: Past due or lump sum a	limony, spousal support, child su	pport, maintenance, divorce settler	ment, property settleme	nt
Yes. Give specific information	1			
			Alimony:	\$
			Maintenance:	\$
	i i iii		Support:	\$
			Divorce settlement:	\$
			Property settlement:	\$
<ol> <li>Other amounts someone owes you Examples: Unpaid wages, disability Social Security benefits;</li> </ol>	ou insurance payments, disability b unpaid loans you made to some	enefits, sick pay, vacation pay, wo	rkers' compensation,	
<b>≥</b> No	, , , , , , , , , , , , , , , , , , , ,			
Yes. Give specific information				
				\$

Case 1:21-bk-11098-VK  Debtor 1 Fræ Name Middle Name	/	/07/21 Enter Page 12 of <sub>a</sub>	red 07/07/2 67 se nui (# known)	1 10:05:10 / 2/ - /	Desc 3K - 11098 V K
31. Interests in insurance policies  Examples: Health, disability, or life insurar  No		SA); credit, homeowr	ner's, or renter's	insurance	
Yes. Name the insurance company of each policy and list its value	Company name:	E	Beneficiary:		Surrender or refund value:
	ANTHEMY (HEZ	VHL !	and the same		\$
	PRIMERICA (	AFR .	DEborph	Exposite	\$O
32. Any interest in property that is due you If you are the beneficiary of a living trust, e property because someone has died.	from someone who has died xpect proceeds from a life insu	I rance policy, or are c	currently entitled	to receive	\$
Yes. Give specific information					\$
33. Claims against third parties, whether or Examples: Accidents, employment dispute	not you have filed a lawsuit of s, insurance claims, or rights to	or made a demand ( sue	for payment		
Yes. Describe each claim					\$
34. Other contingent and unliquidated claim to set off claims  No  Yes. Describe each claim.	s of every nature, including o	counterclaims of the	e debtor and rig	ghts	\$
No  Yes. Give specific information	list				\$
36. Add the dollar value of all of your entries for Part 4. Write that number here	s from Part 4, including any e	ntries for pages you	u have attached	ı <b>→</b>	: 350C
Part 5: Describe Any Business-R	elated Property You O	wn or Have an	interest in.	List any rea	al estate in Part 1.
37. Do you own or have any legal or equitable No. Go to Part 6.  Yes. Go to line 38.	e interest in any business-rel	ated property?			
				<b>p</b> D	current value of the ortion you own? onot deduct secured claims exemptions.
38. Accounts receivable or commissions you	already earned			-	1
☐ No					
Yes. Describe				æ	
39. Office equipment, furnishings, and suppli Examples: Business-related computers, software, r	es nodems, printers, copiers, fax mach	nines, rugs, telephones,	desks, chairs, elec	etronic devices	
Yes. Describe				\$_	

	21-bk-11098-VK	Doc 10 Filed 0	7/07/21 En _ Page 13 (	tered 07/07/21 1 of 67 of ase nu (if known)	0:05:1 21 - L	0 Desc 3 <i>K-11098 VK</i>
40. Machinery, fixture	es, equipment, supplies	you use in business, and	tools of your trad	le.		
° <b>∑</b> No		,	. toolo or your true			
Yes. Describe						; ; <b>q</b> :
						Ψ
41. Inventory						
No Yes. Describe.						
						\$
42. Interests in partne	erships or joint ventures	ì				
<b>⊅</b> No						
Yes. Describe.	Name of entity:			% of own	ership:	
	- 110				-	\$
					%	\$
			<del></del>		%	\$
43. Customer lists, ma	illing lists, or other com	pilations				
No Yes, Do your li	sts include personally i	dentifiable information (as	e defined in 11 II C	C		
☐ No	porocinany i	actionable information (as	s defined in 11 U.S.	.C. § 101(41A))?		
🗖 Yes. D	escribe					
						\$
	ed property you did not	already list				
No ☐ Yes. Give speci	fic					
information						\$
					<del></del>	\$
						\$
				14		\$
			· · · · · · · · · · · · · · · · · · ·			\$
						\$
45. Add the dollar valu for Part 5. Write tha	e of all of your entries fr it number here	rom Part 5, including any	entries for pages	you have attached		\$ 850 au
				•••••••••••••••••••••••••••••••••••••••	<del>7</del>	
Table for the particle.						
Part 6: Describe If you own	Any Farm- and Comn or have an interest in fa	<b>nercial Fishing-Relate</b> armland, list it in Part 1.	d Property You	Own or Have an Inte	erest In.	
46. Do you own or have No. Go to Part 7.	any legal or equitable i	nterest in any farm- or co	mmercial fishing-	related property?		
Yes. Go to line 4						
						Current value of the
						portion you own?
47. Farm animals						Do not deduct secured claims or exemptions.
	poultry, farm-raised fish					
☐ No						
☐ Yes					!	
					į	\$
					i	

46.

47.

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48. Crops—either growing or harvested	
☐ No	
Yes. Give specific information	•
49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade	
☐ No ☐ Yes	
	1 2 4
50 Farm and fishing cumulian about the	\$
50. Farm and fishing supplies, chemicals, and feed	
☐ Yes	
51. Any farm- and commercial fishing-related property you did not already list	Φ
Yes. Give specific	
information,	\$
52. Add the dollar value of all of your entries from Part 6, including any entries for pages yo	ou have attached
for Part 6. Write that number here	*
Describe All Property You Own or Have an Interest in That You San John Service All Property You Own or Have an Interest in That You San John Service All Property You Own or Have an Interest in That You San John Service Interest Inte	ou Did Not List Above
	\$
	\$
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$
55. Part 1: Total real estate, line 2	. EVE 2000 00
56 Part 2: Total makintan time #	<b>3</b> \$ 383
57. Part 3: Total personal and household items, line 15	
58. Part 4: Total financial assets, line 36 \$ \$500 000	
59 Part 5: Total business-related property, line 45	
60. Part 6: Total farm- and fishing-related property, line 52	
61. Part 7: Total other property not listed, line 54 +\$	
62. Total personal property. Add lines 56 through 61	y personal property total → +\$ 72,050
63. Total of all property on Schedule A/B. Add line 55 + line 62	\$ 657, 050,°°C

63.

Fill in this information to identify your case	Main Document	Page 15 of 67	
	Main Document	rage 13 of 07	
Debtor 1 Johan Canner	Femui		
First Name Middle Nai Debtor 2	me Last Name	<u>C</u>	
(Spouse, if filing) First Name Middle Nam	Eus. Hame		
United States Bankruptcy Court for the: Central [			
Case number 1:21-1312-11098	- VK		☐ Check if this is a
			amended filing
Official Form 106C			
Schedule C: The Pro	merty You	Claim as Even	4
Re as complete and assurate as a site.	perty rou	Claim as Exemp	04/19
Be as complete and accurate as possible. If two in Using the property you listed on Schedule A/B: Pospace is needed, fill out and attach to this page a your name and case number (if known).			
For each item of property you claim as exemp specific dollar amount as exempt. Alternativel of any applicable statutory limit. Some exemp			
imits the exemption to a particular dollar amo	ount and the value of the		
vould be limited to the applicable statutory an	nount.		amount, your exemption
Part 1: Identify the Property You Clai	m as Exempt		
1. Which set of exemptions are you claiming	? Check one only, even	if your spouse is filing with you.	
You are claiming state and federal nonba  You are claiming federal exemptions. 11	hkruptcy exemptions. 11 U.S.C. § 522(b)(2)	i U.S.C. § 522(b)(3)	
	• · · · · · · · · · · · · · · · · · · ·		
2. For any property you list on Schedule A/B	that you claim as exen	npt, fill in the information below.	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	
	Copy the value from		Specific laws that allow exemption
	Schedule A/B	Check only one box for each exemption.	Specific laws that allow exemption
Brief Home		Check only one box for each exemption.	Specific laws that allow exemption
description:		\$\$	Specific laws that allow exemption
description:		- <b>_</b> \$	Specific laws that allow exemption
description:  Line from Schedule A/B: 1.1		\$\$ 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption
description:  Line from Schedule A/B: 1.1  Brief description: Line from Line		\$\$ 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption
description:  Line from Schedule A/B: 1.1  Brief description: Line from Schedule A/B:  Line from Schedule A/B:		\$\$ 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption
description:  Line from Schedule A/B: 1.1  Brief description: Line from Line		\$\$ 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption
description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Brief  Tinkshonk  Line from Schedule A/B:	\$ 550,000 \$ \$ \$ 8000 \$	\$\$  100% of fair market value, up to any applicable statutory limit  \$\$  100% of fair market value, up to any applicable statutory limit  \$\$	Specific laws that allow exemption
description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Brief description: Line from Schedule A/B: Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:	\$_8000 00 \$_15,000 00	\$\$ 100% of fair market value, up to any applicable statutory limit  \$\$ 100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption
description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Are you claiming a homestead exemption o	\$_\frac{550}{5000} \frac{500}{500} \frac{500}{	\$\$  100% of fair market value, up to any applicable statutory limit  \$\$  100% of fair market value, up to any applicable statutory limit  \$\$  100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption
description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Brief description: Line from Schedule A/B: Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:  Line from Schedule A/B:	\$_\frac{550}{5000} \frac{500}{500} \frac{500}{	\$\$  100% of fair market value, up to any applicable statutory limit  \$\$  100% of fair market value, up to any applicable statutory limit  \$\$  100% of fair market value, up to any applicable statutory limit	Specific laws that allow exemption
description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Brief description: Line from Schedule A/B:  Are you claiming a homestead exemption o (Subject to adjustment on 4/01/22 and every 3	\$ STO COO STATE OF STORY OF ST	\$	Specific laws that allow exemption

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Case nl.

Debtor 1

First Name Middle Name

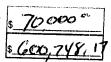
### **Additional Page**

Brief descrip on <i>Schedule</i>	otion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B	TIMESHAR 1.4	s_14,000 9	\$\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B	73 ponschip 911	s 79,000 °	\$\$100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$00% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$\$ and 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: - Line from Schedule A/B; -			\$ 100% of fair market value, up to any applicable statutory limit	

Main Document Page 17 of 67		
ise:		
Name Last Name		
, castiant		
- Edd (Taille		
18 VK		☐ Check if this is an
		amended filing
		· ·
's Who Have Claims Secui	ed by Propert	ty 12/15
. If two married people are filing together, both are	qually responsible for sup	plying correct
se number (if known).	and attach it to this form.	On the top of any
NV VOUE property?		
m to the court with your other schedules. You have not	ning else to report on this form	<b></b>
·	mig else to report on this loft	п.
nore than one secured claim, list the creditor separately	- John T.	···
as a particular claim, list the other creditors in Part 2.  Iabetical order according to the creditor's name.	Do not deduct the that s	of collateral Unsecured upports this portion
	_	If any
The second of the second secon	\$ <i>~7.</i> 2,73938 \$ 5	50,000 \$
As of the date you file the slaim in the state of	no cal	
Contingent		
Unliquidated		
car loan)		
Other (including a right to offset)	_	
	-	
Last 4 digits of account number		(T)
Describe the property that secures the claim:	\$ 133,008,79 \$ 53	Decor &
end montgraph		/
As of the data was fill II		
Unliquidated		
Disputed		
An agreement you made (such as mortgage or secured car loan)		
Statutory lien (such as tax lien, mechanic's lien)		
- Vision in State of Orace)		
Last 4 digits of account number		
lumn A on this page. Write that number here:	425.788.17	
	Servame  Last Name  Last Name  Last Name  Last Name  Last Name  ID District of California  CS  Who Have Claims Secur  If two married people are filing together, both are expected the property of known).  The property of the Additional Page, fill it out, number the entries, see number (if known).  The property of the court with your other schedules. You have nother than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. The property has a particular claim, list the other creditors in Part 2. The property has secured the property that secures the claim:  HOME  23C61  As of the date you file, the claim is: Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:  Last 4 digits of account number  Describe the property that secures the claim:	To Who Have Claims Secured by Proper  If two married people are filing together, both are equally responsible for sup yithe Additional Page, fill it out, number the entries, and attach it to this form.  To wore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2.  The content of the court with your other schedules. You have nothing else to report on this form as a particular claim, list the other creditors in Part 2.  The content of the count with your other schedules. You have nothing else to report on this form as a particular claim, list the other creditors in Part 2.  The content of the count with your other schedules. You have nothing else to report on this form as a particular claim, list the creditor's name.  Describe the property that secures the claim:  The Contingent of the date you file, the claim is: Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit of the filen of the date of collaring a right to offset)  Cher (including a right to offset)

Case 1:21-bk-11098-VK Doc 10 Filed 07/07/21 Entered 07/07/21 10:05:10 Page 18 of 67 n Dogument Debtor 1 1:21-BK - 11098 VK **Additional Page** Column A Column B Column C Part 1: After listing any entries on this page, number them beginning with 2.3, followed Amount of claim Value of collateral Unsecured by 2.4, and so forth. Do not deduct the that supports this portion value of collateral. claim if any Describe the property that secures the claim: As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only 💢 Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated City ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only ☐ An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent City State ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset)

Last 4 digits of account number Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages.



Check if this claim relates to a

Write that number here:

community debt Date debt was incurred

page

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First Name Middle Name Last Name

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Debtor 1

Part 2:

## List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Numbe	er Street			_
City		State	ZIP Code	<del></del>
Name				On which line in Part 1 did you enter the creditor? Last 4 digits of account number
Number	Street			
	<del></del>			_
City		State	ZIP Code	
Name				On which line in Part 1 did you enter the creditor?
Number	Street			Last 4 digits of account number
City		State	ZIP Code	_
Name				On which line in Part 1 did you enter the creditor?
				Last 4 digits of account number
Number	Street			
City		State	ZIP Code	
N.				On which line in Part 1 did you enter the creditor?
Name				Last 4 digits of account number
Number	Street			-
City		Slate	ZIP Code	-
And the second				On which line in Part 1 did you enter the creditor?
Name			**************************************	Last 4 digits of account number
Number	Street			
City		Chal		
,		State	ZIP Code	

Case 1.21-0K-11098-VK L		07/07/21 10:05:	to Des	SC .
Fill in this information to identify your ca:	dain Decument — Page 30 of 67			
Debtor 1 John Carmen	Ent			
First Name Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name			
United States Bankruptcy Court for the: Central Distri				
(10) 71			☐ Che	ck if this is an
Case number/				ended filing
Official Form 106E/F				
Schedule E/F: Creditors	Who Have Unsecured C	laime		4044
				12/15
Be as complete and accurate as possible. Use F List the other party to any executory contracts of A/B: Property (Official Form 106A/B) and on Sc/ creditors with partially secured claims that are I needed, copy the Part you need, fill it out, numb any additional pages, write your name and case	or unexpired leases that could result in a claim. ledule G: Executory Contracts and Unexpired L isted in Schedule D: Creditors Who Have Claim er the entries in the boxes on the left Attach th	Also list executory co	ontracts on S 06G). Do not	Schedule include any
Part 1: List All of Your PRIORITY Unsec	ured Claims			
1. Do any creditors have priority unsecured cla	ims against you?			<del></del>
No. Go to Part 2.				
Yes.				
<ol><li>List all of your priority unsecured claims. If a each claim listed, identify what type of claim it is</li></ol>				
(For an explanation of each type of claim, see the	of Part 1. If more than one creditor holds a particul e instructions for this form in the instruction bookle	lar claim, list the other cl	editors in Pai	rt 3.
7	- West Desired for this form in the matricellar bookie	Total claim	Priority	Nonpriority
			amount	amount
2.1	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When was the debt incurred?	-		
Number Street	whien was the dept incurred?	_		
	<ul> <li>As of the date you file, the claim is: Check all t</li> </ul>	hat apply.		
City State ZIP Code	- ☐ Contingent			
Who incurred the debt? Check one.	Unliquidated			
Debtor 1 only	☐ Disputed			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the gove	ernment		
Check if this claim is for a community debt	Claims for death or personal injury while you we			
Is the claim subject to offset?	intoxicated			
☐ No ☐ Yes	Other. Specify	*** 1		
2.2	Organization, established interesting the Americans of the Astronomerous testics emergenced parts of the last similar			
Priority Creditor's Name	Last 4 digits of account number	<b>\$</b>	\$	\$
	When was the debt incurred?	_		· · · · · · · · · · · · · · · · · · ·
Number Street	An of the date was fill to			
	As of the date you file, the claim is: Check all th	at apply.		
City State ZIP Code	☐ Contingent ☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only				
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the gover	nment		
☐ Check if this claim is for a community debt	<ul> <li>Claims for death or personal injury while you were intoxicated</li> </ul>	Э		
Is the claim subject to offset?				
☐ No ☐ Yes	Other. Specify			
·				

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#### Your PRIORITY Unsecured Claims — Continuation Page Part 1:

Af	ter listing any entries on this page, number thei ਹ	m beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
L	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
:	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply  Contingent			
	City State ZIP Code	Unliquidated Disputed			
	Who incurred the debt? Check one.	•			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	☐ Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated  Other. Specify			
	Is the claim subject to offset?			•	
	☐ No ☐ Yes				
	The Control of the Co	Last 4 digits of account number	Kalanda darah dalah barah dalam dalam menjang ajum se	\$	<b>\$</b>
	Priority Creditor's Name			***************************************	
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only  Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
	At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
		Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated  Other. Specify			
	Is the claim subject to offset?				
	☐ No ☐ Yes				
	e in with the behavior rest. I reference for the sign in the class to the constraint and the second with the constraint and well as a constraint of the sign.	ефинастиван из импере ферм. Неовой равулителя извиште у вийние навраненный пут пречисти и ст выпутновающий	Payers and the state of the payers and the payers are	Marine S. A. et al	
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	☐ Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only				
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated  Other. Specify	orth debutrobbut adacte we carry speed	erat elemente i aborrocca i la successiona de la companya de la companya de la companya de la companya de la c	Manager a
	is the claim subject to offset?	- war abant			
	□ No				
	Yes				

Part 2:

#### Your NONPRIORITY Unsecured Claims — Continuation Page

Aft	er listing any entries on this page, number them beginning with 4	.4, followed by 4.5, and so forth.	Total claim
4.1	Shawn Dangshi	Last 4 digits of account number	\$ 338,00
	15760 VENTURA Blad # 2060	When was the debt incurred? 2019	/
	Eaxino GA. 91436	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
4.5	Mank to Gordon Murphy Nonpriority Creditor's Name	<b>.</b>	\$35000°
	12400 Wilshiam Blad	When was the debt incurred? 2019	
	Number, Street  A  A  900:27	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	Debtor 1 only	·	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	☐ Check if this claim is for a community debt	you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No □ Yes	Other. Specify	
4.6	on the contract of the contrac	Magnetic and an extension of the second seco	\$121_000 cm
	Nonpriority Freditor's Name	Last 4 digits of account number	
	Nonpriority Great Street PANTAGES  Nonpriority Great PANEARULET Suite 211	When was the debt incurred? 2070	
	VM NUYS CA. 91406	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?  No  Yes	Other. Specify	

Deb	Case 1:21-bk-11098-VK Doc 10	) Filed ( <del>Documen</del>		Desc
Pa	rt 2: List All of Your NONPRIORITY Unsecur	ed Claims		
4.	nonpriority unsecured claim, list the creditor separately f	nis form to the  Iphabetical of the original origin		t list claims already
4.1	Robert Ginsburg Nonpriority Credito's Name  21557 Brahade Blad VA		Last 4 digits of account number	Total claim
	21551 Brahad Blad va	# 95	When was the debt incurred? 2018	· · · · · · · · · · · · · · · · · · ·
	Who incurred the debt? Check one.	1367 Sode	As of the date you file, the claim is: Check all that apply.  Contingent	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt		☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?  No Yes	galaterie (f. feronolite formación). Jacobs	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	S. Market and the
4.2	Nonpriority Creditor's Name		Last 4 digits of account number	\$
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State ZIP C  Who incurred the debt? Check one.  □ Debtor 1 only □ Debtor 2 only	ode	☐ Contingent☐ Unliquidated☐ Disputed☐	
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt		Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
1.3	Is the claim subject to offset?  No Yes	nero tera <b>Per</b> nision do la collectiva de la celebrativa della celebrativa de la celebrativa della cel	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	
	Nonpriority Creditor's Name  Number Street		Last 4 digits of account number	\$
	City State ZIP Co	ode	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only		☐ Contingent☐ Unliquidated☐ Disputed☐	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	ls the claim subject to offset? ☐ No ☐ Yes		that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	

Debtor 1

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with	4.4, followed by 4.5, and so forth.	Total claim
4.4 PAUMER TAXECTMENTE	Last 4 digits of account number	\$ 5000 <sup>66</sup>
Nonpriority Creditor's Name  7100 HAVENhund # 211	When was the debt incurred? 2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
City NUYS CH. 91906 State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	
M No	Giner. Specify	
Yes		
4.5 BEN SHAHAADANI CO PAUL PIETENS	Last 4 digits of account number	\$ 77.000
SEN SHAHAADANI CO PAUL PRETENS Nonpriority Creditor's Name  8383 Wilshing Blvd. Soita 800	When was the debt incurred? 2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
,	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
∕ No ☐ Yes		
Anzara Lachan	Last 4 digits of account number	\$ 300,000
ANNEX LANGHASA MC  Nonpriority Creditor's Name  7450 NESEDA BIXO  Number Street	When was the debt incurred? 2021	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
,	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
X No		
Yes		

Debto	First Name Middle Name Name	pip Bockinner	nt Page 25 of son Turr if known /221-18k-//	Desc 1098 V/C
	21 LIST AND TOUR NORPHION IT ON	secured Claims		
Ĺ	o any creditors have nonpriority unsecured on the No. You have nothing to report in this part. Sures			
4. Li	st all of your nonpriority unsecured claims in	rately for each clair	order of the creditor who holds each claim. If a creditor ham. For each claim listed, identify what type of claim it is. Do no list the other creditors in Part 3.If you have more than three no	t liet eleime elveedu
1.1	110 A. L. /40.	. :44		Total claim
	Nonpriority Creditor's Name		Last 4 digits of account number	. 77.000
i	15910 Venting Blad Number Street	12th Floor	When was the debt incurred? 2018	Waster former franchism and the state of the
Č	City CA. State	71 436 ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only		Contingent Unliquidated Disputed	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce</li></ul>	
i Q	s the claim subject to offset? ▼ No □ Yes		that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	3
2	Robaina indutaina, Co to Conpriority Creditor's Name	GNAISES	Last 4 digits of account number  When was the debt incurred?	\$ 53,000 °°
Ñ	umber Street  U DONAL A COLL M	91107	As of the date you file, the claim is: Check all that apply.	
Ĉ	ity State	ZIP Code	Contingent	
v	Vho incurred the debt? Check one.		☐ Unliquidated	
	Debtor 1 only Debtor 2 only		☐ Disputed	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		☐ Student loans	
	Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	No Yes		Other. Specify	
N		Professional Control of the Control	Last 4 digits of account number	728 000 66
Nu	onpriority Creditor's Name  (653 VROE Mont		When was the debt incurred? 2019	\$ <u>338, 000</u> 66
Cit	Simi Valley of State	7306T	As of the date you file, the claim is: Check all that apply.	
W	ho incurred the debt? Check one.		Contingent	
	Debtor 1 only		☐ Unliquidated	
	Debtor 2 only		☐ Disputed	
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unacquired states	
ш	At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	

₩ No Yes

lacksquare Check if this claim is for a community debt

Is the claim subject to offset?

☐ Student loans

Other. Specify \_

Obligations arising out of a separation agreement or divorce that you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

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Fill in this in	formation to ide	entify your case:	
Debtor	John C	ANNEN EST Middle Name	205/16 Last Name
Debtor 2 (Spouse If filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court fo	rthe: Central District o	f California
Case number (If known)	1:21-BK	11098VK	

☐ Check if this is an amended filing

### Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

State

ZIP Code

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

 List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the cor	ntract or lease State what the contract or lease is for
2.1	Bank OF AMERICA PO GOK 31785	
2.2	Number Street  TAMPA FL. 336.3  City State ZIP Code	
2.2	Name PO, BOX 10378 Number Street	CALIFORNIA  G-0178 HOUSE
2.3	City State ZIP Code	6-0178 HOUSE
	Name  Number Street	
2.4	City State ZIP Code	
	Number Street	
	City State ZiP Code	
2.5	Name	
	Number Street	

City

Debtor 1

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First Name Middle Name Last pine Case no

Case number (# known) 1:21-BK-11078 VK



# Additional Page if You Have More Contracts or Leases

### Person or company with whom you have the contract or lease

What the contract or lease is for

2	· <b>_</b>				
	Name				
	Number	Street			
	City	· · · · · · · · · · · · · · · · · · ·	State	ZIP Code	
2.	<u></u>				
	Name			•	
	Number	Street			
	City		State	ZIP Code	
2	_				
	Name				
	Number	Street			
	City		State	ZIP Code	
2	-				
	Name	<u></u>			
	Number	Street			
	City		State	ZIP Code	
2	-				
	Name			<del></del>	
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		State	ZIP Code	
2					
	Name				
	Number	Street			
	City		C1-1-	710.0	
	Uny		State	ZIP Code	

Case 1.21-bk-11098-vr	V DOC 10 F		of 67
Fill in this information to identify your	Caus:	ment Page 28	UI U <i>1</i>
Debtor 1 Dhw Carme	e Espa	ita	
Debtor 2	ddle Name	Last Name	
	ddle Name	Last Name	
United States Bankruptcy Court for the: Cent		fornia	
Case number 1:21-BK - 110	98 VK		
			☐ Check if this is
Official Form 106H			amended filing
Schedule H: Your Co	debtors		12/15
and number the entries in the boxes on to case number (if known). Answer every questions are not	the left. Attach the Aduestion.  The filing a joint case, of the filing a joint case, or legal equivalent or territory did you live the filing and filing a joint and filing and filing a joint and filing a joint and filing a joint case, or legal equivalent and filing and	do not list either spouse as operty state or territory? Puerto Rico, Texas, Washi live with you at the time?  ?	(Community property states and towitering include
Schedule E/F, or Schedule G to fill ou  Column 1: Your codebtor	it Column 2.		
Column 1. Your codeptor			Column 2: The creditor to whom you owe the debt
.1			Check all schedules that apply:
Name			Schedule D, line
Number Street			Schedule E/F, line
***			Schedule G, line
City	State	ZIP Code	<del></del>
Name			Cahadula D. lina
Name			<ul><li>☐ Schedule D, line</li><li>☐ Schedule E/F, line</li></ul>
Number Street			Schedule G, line
City	State	ZIP Code	
3		ZIF CODE	
Name			Schedule D, line
Number Street			Schedule E/F, line
Cit			☐ Schedule G, line
City	State	ZIP Code	_

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Debtor 1

-	hiama	14:22

Last Name

Case num. er (if known)\_

	Column 1: Your codebtor			Column 2: The creditor to whom you owe the debt	
3				Check all schedules that apply:	
	Name			Schedule D, line	
				☐ Schedule E/F, line	
	Number Street			Schedule G, line	
3	City	State	ZIP Code		
3	Name			Schedule D, line	
				☐ Schedule E/F, line	
	Number Street			☐ Schedule G, line	
	City	State	ZIP Code		
3	Name			Schedule D, line	
				Schedule E/F, line	
	Number Street			Schedule G, line	
	City	State	ZIP Code		
3					
	Name			Correctale D, linie	
				Schedule E/F, line	
	Number Street			☐ Schedule G, line	
3	City	State	ZIP Code		
	Name			Schedule D, line	1
				☐ Schedule E/F, line	-
	Number Street			Schedule G, line	1
3	City	State	ZIP Code		1
	Name			Schedule D, line	
				☐ Schedule E/F, line	
	Number Street			Schedule G, line	
3	City	State	ZIP Code		
	Name			Schedule D, line	
				☐ Schedule E/F, line	
Ī	Number Street			Schedule G, line	
¯	Oity	State	ZIP Code	_	
7	Name			Schedule D, line	
_				☐ Schedule E/F, line	
١	lumber Street			Schedule G, line	
7	City	State	ZIP Code	<u>-</u>	

	Main Doc	ument F	Page 30 of	67	
Fill in this information to identif	y your case:				
Debtor 1 John C	40000	= <u>.</u>			
First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	Central District of Ca	alifornia			
Case number 1:21-Bk-	11098 VK	_		Check i	f this is:
(A MIONITY				☐ An a	imended filing
Official Form 106I				🔲 A su	pplement showing postpetition chapter 1 me as of the following date:
				MM /	DD / YYYY
Schedule I: You					12/15
supplying correct information. If y if you are separated and your sporseparate sheet to this form. On the Part 1: Describe Employm	use is not filing with you, e top of any additional pa	do not include	your spouse	is living with	otor 2), both are equally responsible for you, include information about your spou- ouse. If more space is needed, attach a known). Answer every question.
Fill in your employment information.		Debtor 1			
If you have more than one job,		Dentol I	PRIFECTION TO THE CONTROL OF THE CON	and a special department of the state of the special section of the	Debtor 2 or non-filing spouse
attach a separate page with information about additional employers.	Employment status	☐ Employe Not empl			Employed  Not employed
Include part-time, seasonal, or		, (	,		- Not employed
self-employed work.  Occupation may include student or homemaker, if it applies.	Occupation		<del></del>		Anthem  20 Vinginia AU  Number Street
	Employer's name				Anthem
	Employer's address	Number Stree			220 Vinginia AU
		Transci Gire			Number Street
		City	State ZIP	Code	City State ZIP Code
	How long employed there	e?	<del></del>		23 yes
Part 2: Give Details About	Monthly Income				
Estimate monthly income as of t spouse unless you are separated.	he date you file this form.	. If you have not	hing to report fo	or any line, wr	ite \$0 in the space. Include your non-filing
If you or your non-filing spouse have below. If you need more space, atta	e more than one employer	combine the int			
			For	Debtor 1	For Debtor 2 or
2. List monthly gross wages, salar		ore all navroll	Alexander pick as all home in suggestion of the	THE PROPERTY WEST STEELS STEELS	non-filing spouse
deductions). If not paid monthly, c	y, and commissions (befo alculate what the monthly w	vade would be	2	1	
deductions). If not paid monthly, comments and list monthly overti	alculate what the monthly w	vage would be.	2. \$3. +\$	0	\$ 8506 92 + \$ C

Debtor 1

<b>T</b> .		Main	Document
JOHN	CAME	v tu	US/ 12

Case number (# known) / 21BK - 11098 VK

		For	Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here	<b>→</b> 4.	\$		\$\S\06.92	
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	æ		s/838 22	
5b. Mandatory contributions for retirement plans	5b.	Ψ		\$100.25	
5c. Voluntary contributions for retirement plans	5c.	φ	<del></del>	3 130 1 250	
5d. Required repayments of retirement fund loans		ф <u>—</u>		\$1701.38	
5e. Insurance	5d.	»		\$	
5f. Domestic support obligations	5e.	\$	<del></del>	\$ <u>7069</u> 4	
	5f.	\$		\$ <u> </u>	
5g. Union dues	5g.	\$	·	\$ <i>O</i>	
5h. Other deductions. Specify: FSA DEO LTO ACCOPENTAL	5h.	+\$		+ \$ 30538	
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$		s 4391.92	
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0	\$ 4115,00	
8. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	00	\$	0	s 🔘	
8b. Interest and dividends	8a. 8b.	Φ.	^	^	
8c. Family support payments that you, a non-filing spouse, or a depender regularly receive		Φ		\$ <u> </u>	
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	6	\$ <u>O</u>	
8d. Unemployment compensation	8d.	\$	$\circ$	s ()	
8e. Social Security	8e.	\$ 20	76.00	\$ (3	
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f.	\$	<u>C</u>	\$ <i>C</i> }	
8g. Pension or retirement income	8g.	<b>c</b>	0	. 0	
8h Other monthly income Care it	-	Ψ	<u> </u>	\$	
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	8h 9. [	+\$ \$_22	76.00	* O	
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$ 22	76 ce +	\$ 4/1500 = \$639	10
11. State all other regular contributions to the expenses that you list in Schedu	L.	· · · · · · · · · · · · · · · · · · ·			
Include contributions from an unmarried partner, members of your household, you friends or relatives.	<i>re J.</i> ur dep	pendents	, your roomn	nates, and other	
Do not include any amounts already included in lines 2-10 or amounts that are no	it ava	ilahla ta r	331/ AVPAPAA	a liabatin Octobrit	
Specify:	. ava	nable (0 f	ay expense:	s listed in <i>Schedule J.</i> 11, <b>+</b> \$	,
12. Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Your Assets and Liabilities and Certain States	erdt ie	the com	hina d wa a will-	lly income.	700
13 Do you expect an increase or decrease within the year after you file this for	m?			Combined monthly inc	ome
Yes. Explain:		<del></del>			

Fill in this information to identify	your case:			
	Middle Name  Middle Name  Last Name  Central District of California	A super	this is: mended filing pplement showing pos nses as of the followin	tpetition chapter 13 g date:
Official Form 106J				
Schedule J: You	ur Expenses			40/40
Be as complete and accurate as poinformation. If more space is neede (if known). Answer every question.  Part 1: Describe Your House	essible. If two married people are filed, attach another sheet to this forn	ing together, both are equally n. On the top of any additional	responsible for supply pages, write your nam	12/15 ring correct se and case number
1. Is this a joint case?	senola			
No. Go to line 2. Yes. Does Debtor 2 live in a se	eparate household?			
☐ No ☐ Yes. Debtor 2 must file	Official Form 106J-2, Expenses for S	Separate Household of Debtor 2		
Do you have dependents?  Do not list Debtor 1 and Debtor 2.	No Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	each dependent	Executed interesting and the Executed Company and Company and Company development of the Company	I Periodical dia 16 pundici latrica del processo de cal	No Yes
				☐ No ☐ Yes
				☐ No ☐ Yes ☐ No
				Yes No
B. Do your expenses include expenses of people other than yourself and your dependents?	No Pes			Yes
Part 2: Estimate Your Ongoing	J Monthly Expenses			
Estimate your expenses as of your ba expenses as of a date after the bankro applicable date.	ankruptcy filing date unless you are uptcy is filed. If this is a supplemer	e using this form as a supplen ntal <i>Schedule J</i> , check the box	nent in a Chapter 13 ca at the top of the form	se to report and fill in the
nclude expenses paid for with non-ca such assistance and have included it	ash government assistance if you	(now the value of		
<ol> <li>The rental or home ownership exp any rent for the ground or lot.</li> </ol>	enses for your residence. Include file	al Form 106I.) rst mortgage payments and	Your expens	
If not included in line 4:			4. <del>4. 37. 13.</del>	
4a. Real estate taxes			4a. \$ ///(	-
4b. Property, homeowner's, or rente			4b. \$	
4c. Home maintenance, repair, and			4c. \$ 400	) **
4d. Homeowner's association or cor	ndominium dues		4d \$ 11472	CE

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Debtor 1

John Canner Fans /t

Case number (if known) 1.21-BK-11098VK

			Your expenses
	5. Additional mortgage payments for your residence, such as home equity loans	5.	\$ 1576.82
	6. Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$ 557)00
	6b. Water, sewer, garbage collection	6b.	\$ 1040
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 630.00
	6d. Other Specify:	6d.	\$
7	7. Food and housekeeping supplies	7.	\$ 90000
٤	8. Childcare and children's education costs	8.	\$ ()
g	Clothing, laundry, and dry cleaning	9,	\$ /(7) 00
10	). Personal care products and services	10.	\$ 7,000
11	Medical and dental expenses	11.	\$
12	Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$ <u>250</u> °
13.	Entertainment, clubs, recreation, newspapers, magazines, and books		10000
14.		13. 14.	\$ 70000
15	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.	14.	\$
	15a. Life insurance	45-	1777 50
	15b. Health insurance	15a.	\$ <u>222.59</u>
	15c. Vehicle insurance	15b.	\$
	15d. Other insurance. Specify:	15c. 15d.	\$ 405
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	Installment or lease payments:		·
	17a. Car payments for Vehicle 1	17a.	\$ 61000
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$ 65
	17d. Other. Specify:	17d.	\$
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	s &
9.	Other payments you make to support others who do not live with you.		*
	Specify:	19.	· Ø
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom		*
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$ 0
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	20e. Homeowner's association or condominium dues	20e.	\$

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Debtor 1 The

the	CAMMEN	Exposite
First Name	Middle Name	Last Name

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21. Other. Specify:	21. <b>+</b> \$	0	
---------------------	-----------------	---	--

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

22a.	s <u>5/18.49</u>	
22b.	\$ <u>(</u>	-
22c.	\$ 5/18.49	

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23b. Copy your monthly expenses from line 22c above.

23c. Subtract your monthly expenses from your monthly income.

The result is your *monthly net income*.

23a.	\$	6391.00
23b.	<b>-</b> \$	8118.49

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

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			9
Fill in this information	to identify your case:		
Debtor 1 Toha	CAMEN Middle Name	Egos itc Last Name	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	<del></del>
United States Bankruptcy C		District of	
Case number /:2/- (If known)	-BK-11098VIC	or .	

Check if this is an amended filing

### Official Form 106Dec

# **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an attorned No	ey to help you fill out bankruptcy forms?
Yes. Name of person	. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 2 MM / DD / YYYY

Fill in this information to identify your case:			
Debtor 1 John American Middle Name	Esposito Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Central Distric	t of California		
Case number 1:21-1316-11098 VK	·		Check if this is an
( Nom)			amended filing
Official Form 107			
Statement of Financial Affa	irs for Indiv	iduals Filing for Bankruptcy	04/19
	rate sheet to this for	g together, both are equally responsible for supplyir m. On the top of any additional pages, write your na ou Lived Before	
4. Mhat is your ourrent marital status?			<b>7-48-5-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-</b>
1. What is your current marital status?			
Married			
Married ☐ Not married	a a tha a tha a subara su		
Married	-		Dates Debtor 2 lived there
Married Not married  During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last 3	Byears. Do not include  Dates Debtor 1	where you live now.	
Married Not married  During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last 3	Byears. Do not include  Dates Debtor 1	where you live now.  Debtor 2:	lived there
Married Not married  During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last 3  Debtor 1:	Dates Debtor 1 lived there	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code	lived there  Same as Debtor 1  From
Married Not married  During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last 3  Debtor 1:  Number Street	Dates Debtor 1 lived there	Debtor 2:  Same as Debtor 1  Number Street	lived there  Same as Debtor 1  From
Married Not married  2. During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last 3  Debtor 1:  Number Street	Dates Debtor 1 lived there  From To	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code	Iived there  Same as Debtor 1  From  To  Same as Debtor 1  From
Married Not married  2. During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last 3  Debtor 1:  Number Street  City State ZIP Code	Dates Debtor 1 lived there  From To	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code	Iived there  Same as Debtor 1  From  To  Same as Debtor 1
Married Not married  2. During the last 3 years, have you lived anywher No Yes. List all of the places you lived in the last 3  Debtor 1:  Number Street  City State ZIP Code	Dates Debtor 1 lived there  From To	Debtor 2:  Same as Debtor 1  Number Street  City State ZIP Code	Iived there  Same as Debtor 1  From  To  Same as Debtor 1  From

Official Form 107

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Debtor 1

TONA CAMEN Exposits

Name Middle Name Last Name

Case number (# known) 1-21-BK-11098 VK

4.	Did you have any income from employment Fill in the total amount of income you received If you are filing a joint case and you have income	d from all jobs and all busi	nesses, including part-ti	me activities.	ndar years?
	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips  Operating a business	\$ 1B,000°	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For last calendar year: (January 1 to December 31, 2020)	Wages, commissions, bonuses, tips  Operating a business	\$ <b>25,000</b>	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
	For the calendar year before that:  (January 1 to December 31, 2019)	Wages, commissions, bonuses, tips  Operating a business	\$ 2 <b>5,00</b> 0	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	Include income regardless of whether that inc unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e	ents; pensions, rental inco a joint case and you have	ome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	uits; royalties; and
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:		\$ \$ \$		\$ \$ \$
	For last calendar year:		\$		\$
	(January 1 to December 31, YYYY)				\$ \$
	For the calendar year before that:		\$		\$
	(January 1 to December 31,)		\$ \$		\$ \$
				The state of the s	

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Debtor 1

John Canner Esposite

Case number (# known) / 21-BK-11098 VK

Part 3:

List Certain Payments You Made Before You Filed for Bankruptcy

☐ No.					e <mark>bts.</mark> <i>Consumer debt</i> s ar household purpose."	re defined in 11 U.S.C. § 10	I (8) as
	•	•	•	•	ay any creditor a total of	\$6,825* or more?	
	No. Go to line 7.						
	total amour child suppo	nt you paid t rt and alimo	hat creditor. Do ony. Also, do no	o not include p ot include payr	payments for domestic suments to an attorney for	or more payments and the upport obligations, such as this bankruptcy case.	
[] Voc	. Debtor 1 or Debtor		-	-		,	
Tes.					ay any creditor a total of	\$600 or more?	
	No. Go to line 7.			, ,	-,,	<b>.</b>	
	Yes. List below oreditor. Do	each credito not include	payments for	domestic supp	\$600 or more and the to port obligations, such as ey for this bankruptcy ca	otal amount you paid that child support and se.	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Creditor's Name			<del>4,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	\$	\$	☐ Mortgage ☐ Car
	Number Street  City	State	ZIP Code				☐ Credit card ☐ Loan repayment ☐ Suppliers or vendors ☐ Other
	Creditor's Name	State	211 6606		\$	\$	☐ Mortgage
							Car
	Number Street						☐ Credit card ☐ Loan repayment
	City	State	ZIP Code				☐ Suppliers or vendors ☐ Other
	Creditor's Name				\$	\$	☐ Mortgage
							Car
	Number Street						Credit card
							Loan repayment
							_
				• <del></del>			Suppliers or vendors Other

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Debtor 1

John	CAMER	Las Name & Posito	
First Name	Middle Name	Last Name /	
		17	

Case number (#known)	1:21-BK-11098VK	
		_

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No						
Yes. List all payments	s to an insider.					
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name	***************************************			\$	\$	
Number Street						
City	State	ZIP Code				
				\$	\$	
Insider's Name						
Number Street						
		710.0				
City	State	ZIP Code				

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited

Include payments on debts guaranteed or cosigned by an insider.



			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		<del> </del>	-	\$	\$	
Number Street						
City	State	ZIP Code	-			
Insider's Name		<u> </u>	-	\$	\$	
Number Street			-			
City	State	ZIP Code	-			

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Debtor 1

Tohn Camer Eggs To

Case number (# known) 1:21-BK - 1/096 VIL

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į		- 4

thin 1 year before you filed for be at all such matters, including persor d contract disputes.	ankruptcy, were	e you a party in any small claims actions,	lawsuit, court action, divorces, collection suit	or adminis is, paternity	actions, sup	eding? port or custody modifical
No Yes. Fill in the details.						
	Nature	e of the case	Court or agend	:у		Status of the case
Case title			Court Name			Pending
						On appeal
Casa numbar			Number Street			Concluded
Case number			City	State	ZIP Code	
Case title			Court Name			Pending
						On appeal
			Number Street	**	,	Concluded
Case number			City	State	ZIP Code	<u>_</u>
No. Go to line 11. Yes. Fill in the information below.	ails below.			, g	ished, attach	
No. Go to line 11.	ails below.	Describe the prope		, <b>g</b>	Date	
No. Go to line 11.	ails below.	Describe the prope		, <b>g</b>		
No. Go to line 11. Yes. Fill in the information below.	ails below.	Describe the prope	rty	, <b>g</b>		
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name	ails below.	Explain what happe	rty ened repossessed.	, <b>g</b>		
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name	ails below.	Explain what happed Property was	ened repossessed. foreclosed.	, <b>g</b>		
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name		Explain what happe Property was Property was Property was	ened repossessed. foreclosed.			
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street		Explain what happe Property was Property was Property was	ened repossessed. foreclosed. garnished. attached, seized, or lev			Value of the property
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State		Explain what happed Property was Property was Property was Property was Property was	ened repossessed. foreclosed. garnished. attached, seized, or lev		Date	Value of the property
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street		Explain what happed Property was Property was Property was Property was Property was	ened repossessed. foreclosed. garnished. attached, seized, or lev		Date	Value of the property  \$  Value of the propert
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State		Explain what happed Property was Property was Property was Property was Property was	ened repossessed. foreclosed. garnished. attached, seized, or lev		Date	Value of the property  \$  Value of the property
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State		Explain what happed Property was Property was Property was Property was Describe the property	ened repossessed. foreclosed. garnished. attached, seized, or leverty		Date	Value of the property  \$  Value of the propert
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State		Explain what happed Property was Property was Property was Property was Describe the property was Explain what happed	ened repossessed. foreclosed. garnished. attached, seized, or leverty ened repossessed. foreclosed.		Date	Value of the property  \$  Value of the propert

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John	~ CARMEN	Esposite	
First Name	Middle Name	Last Name	

Debtor 1

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,	ause you owed a debt?		
No			
Yes. Fill in the details.			
	Describe the action the creditor took	Date action was taken	Amount
Creditor's Name	•		
Number Street			\$
City State ZIIP Code	Last 4 digits of account number: XXXX	<del></del>	
ditors, a court-appointed receiver, a cus No Yes		an assignee for the benefi	t of
List Certain Gifts and Contribu	tions		
nin 2 years before you filed for bankrup	tcy, did you give any gifts with a total value of mo	re than \$600 per person?	
No			
Yes. Fill in the details for each gift.			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Gifts with a total value of more than \$600 per person	Describe the gifts		Value \$
Gifts with a total value of more than \$600	Describe the gifts		Value
Gifts with a total value of more than \$600 per person	Describe the gifts		Value \$\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
Gifts with a total value of more than \$600 per person	Describe the gifts		Value \$\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift	Describe the gifts		Value \$\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code	Describe the gifts		Value \$\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street	Describe the gifts		Value \$\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code	Describe the gifts		Value  \$  \$ Value
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person		the gifts	\$\$
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600		the gifts	\$ \$ Value
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person		the gifts	\$ \$ Value
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		the gifts	\$ \$ Value
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person		the gifts	\$ \$ Value
Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift		the gifts	\$ \$ Value

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Dehlar	1

John	v Carm	en Espo	site
First Name	Middle Name	Lact Name	

Case number (#known) 1:21-BK -1/098 VK

No			
Yes. Fill in the details for each gift or co	ontribution.		
Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
Charity's Name	_	•	\$
		· Marine Annual	\$
Number Street	_		
City State ZIP Code	<b></b>		
6: List Certain Losses			
No Yes. Fill in the details.	ptcy or since you filed for bankruptcy, did you lose anything		
No Yes. Fill in the details.  Describe the property you lost and	ptcy or since you filed for bankruptcy, did you lose anything  Describe any insurance coverage for the loss	Date of your	fire, other  Value of property
No Yes. Fill in the details.			
No Yes. Fill in the details.  Describe the property you lost and	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your	Value of property
No Yes. Fill in the details.  Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your	Value of property
No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  T: List Certain Payments or Trathin 1 year before you filed for bankrup to consulted about seeking bankruptcy	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Insters Pactor, did you or anyone else acting on your behalf pay or tran	Date of your loss	Value of property lost
No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trathin 1 year before you filed for bankrupt a consulted about seeking bankruptcy lude any attorneys, bankruptcy petition p	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Insters Dicty, did you or anyone else acting on your behalf pay or transfers or preparing a bankruptcy petition?	Date of your loss	Value of property lost
No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Trathin 1 year before you filed for bankrupt consulted about seeking bankruptcy lude any attorneys, bankruptcy petition p	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Insters Dicty, did you or anyone else acting on your behalf pay or transfers or preparing a bankruptcy petition?	Date of your loss	Value of property lost
No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  List Certain Payments or Tracthin 1 year before you filed for bankruptcy a consulted about seeking bankruptcy lude any attorneys, bankruptcy petition p No Yes. Fill in the details.	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Insters Insters Intercorption or anyone else acting on your behalf pay or transor preparing a bankruptcy petition? Ireparers, or credit counseling agencies for services required in your	Date of your loss  asfer any property our bankruptcy.  Date payment or transfer was	Value of property lost \$ to anyone
No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Thin 1 year before you filed for bankrup a consulted about seeking bankruptcy lude any attorneys, bankruptcy petition polyes. Fill in the details.  Person Who Was Paid	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Insters Insters Intercorption or anyone else acting on your behalf pay or transor preparing a bankruptcy petition? Ireparers, or credit counseling agencies for services required in your	Date of your loss  asfer any property our bankruptcy.  Date payment or transfer was	Value of property lost \$ to anyone

	Doc 10    Filed 07/07/21 Main Document      Page 4		1 10:05:10 D	esc
lebtor 1 John Games Last	Name gois/te	Case number (if known)_	1:21-BK-11	078 VK_
	Description and value of any property	y transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid	-			\$
Number Street				\$
City State ZIP Code				
Email or website address	_			
Person Who Made the Payment, if Not You				
Yes. Fill in the details.  Person Who Was Paid	Description and value of any property	transferred	Date payment or transfer was made	Amount of payme
Number Street				\$
				\$
City State ZIP Code				
8. Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers in Do not include gifts and transfers that you have No Yes. Fill in the details.	business or financial affairs? nade as security (such as the granting			
	Description and value of property transferred	Describe any property or debts paid in excha	or payments received nge	Date transfer was made
Person Who Received Transfer				
Number Street				

Person's relationship to you \_\_\_

Person Who Received Transfer

Person's relationship to you \_\_\_\_

ZIP Code

Number Street

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Debtor 1	Jain	Cormen	Fiposite	
	First Name	Middle Name	Las Name	

Case number (# known) 1:21-BK-11078 VK

ithin 10 years before you filed for bankring a beneficiary? (These are often called a No  Yes. Fill in the details.	uptcy, did you transfer any prope asset-protection devices.)	rty to a self-settled tru	st or similar device of v	vhich you
	Description and value of the prop	erty transferred		Date transfer was made
Name of trust				
8: List Certain Financial Accoun	te Instruments Sofo Denseil	. Daves and Stages	o Unito	
lithin 1 year before you filed for bankrup osed, sold, moved, or transferred? clude checking, savings, money market rokerage houses, pension funds, coope No	tcy, were any financial accounts of the counts of the counts; cert	or instruments held in	your name, or for your	·
Yes. Fill in the details.	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance bef closing or transf
Name of Financial Institution	xxxx	Checking		\$
Number Street		Savings  Money market		
City State ZIP Code		☐ Brokerage ☐ Other		
Name of Financial Institution	xxxx	☐ Checking ☐ Savings		\$
Number Street		Money market  Brokerage		
City State ZIP Code		Other		
you now have, or did you have within 1 curities, cash, or other valuables? No	year before you filed for bankrup	tcy, any safe deposit l	box or other depository	for
Yes. Fill in the details.	Who else had access to it?	Describe the	e contents	Do you s have it?
Name of Financial Institution	Name	Parallel State Control of Control		☐ No ☐ Yes

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Debtor 1 First Name Middle Name	Est Name presents	Case number (# known) / 21 - Sk	110j8 V.K
<b>⊠</b> No	age unit or place other than your home	within 1 year before you filed for bankrupto	y?
Yes. Fill in the details.	Who else has or had access to	it? Describe the contents	Do you sti have it?
Name of Storage Facility	Name		☐ No ☐ Yes
Number Street	Number Street		
	CityState ZIP Code	de characteristic de l'Apparent sus conservendent	
City State Zi	P Code		
Part 9: Identify Property You	u Hold or Control for Someone Els	60	
23. Do you hold or control any proper ar hold in trust for someone.	rty that someone else owns? Include ar	ny property you borrowed from, are storing	for,
No Yes. Fill in the details.			
tes. Fai in the details.	Where is the property?	Describe the property	Value
Owner's Name	alan dan dan dan dan dan dan dan dan dan d		٠
	Number Street		<b>\$</b>
Number Street			
City State ZII	City State	ZIP Code	
	nvironmental information		
For the purpose of Part 10, the follow	ring definitions apply:		
hazardous or toxic substances, w		n concerning pollution, contamination, relea , surface water, groundwater, or other medi nces, wastes, or material.	
	or property as defined under any enviro or utilize it, including disposal sites.	nmental law, whether you now own, operate	e, or
	ng an environmental law defines as a h ollutant, contaminant, or similar term.	azardous waste, hazardous substance, toxi	С
Report all notices, releases, and proc	eedings that you know about, regardle	ss of when they occurred.	
No	d you that you may be liable or potentia	lly liable under or in violation of an environ	mental law?
Yes. Fill in the details.	Governmental unit	Environmental law if you be asset	Dots of wall
	Governmental unit	Environmental law, if you know it	Date of notice
Name of site	Governmental unit	<del></del>	

City

Number Street

State

ZIP Code

State ZIP Code

Number Street

City

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Debtor 1

Tohn Connent Eggoste
First Name Middle Name Last Name

Case number (# known) 1-21 BK - 11098 VK

No Yes. Fill in the details.			
	Governmental unit	Environmental law, if you know it	Date of no
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City State ZIP C	Code		
e you been a party in any judicia No Yes. Fill in the details.	l or administrative proceeding under any e	environmental law? Include settlement	
	Court or agency	Nature of the case	Status of case
Case title		_	Pend
	Court Name	•	On ap
	Number Street	-	□
	Number Street	•	Conc
hin 4 years before you filed for b	City State ZIP Code  ur Business or Connections to Any B  ankruptcy, did you own a business or have	e any of the following connections to	☐ Conc
1: Give Details About You hin 4 years before you filed for be A sole proprietor or self-emp A member of a limited liability	City State ZIP Code	e any of the following connections to a ity, either full-time or part-time	
hin 4 years before you filed for be A sole proprietor or self-emp A member of a limited liability A partner in a partnership	city State ZIP Code  ur Business or Connections to Any B  ankruptcy, did you own a business or have loyed in a trade, profession, or other active y company (LLC) or limited liability partne	e any of the following connections to a ity, either full-time or part-time	
hin 4 years before you filed for backing A sole proprietor or self-emp  A member of a limited liability  A partner in a partnership  An officer, director, or manage	City State ZIP Code  ur Business or Connections to Any B  ankruptcy, did you own a business or have loyed in a trade, profession, or other activ y company (LLC) or limited liability partne	e any of the following connections to a ity, either full-time or part-time rship (LLP)	
1: Give Details About You hin 4 years before you filed for both A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage	City State ZIP Code  ur Business or Connections to Any B  ankruptcy, did you own a business or have loyed in a trade, profession, or other activ y company (LLC) or limited liability partner ging executive of a corporation e voting or equity securities of a corporati	e any of the following connections to a ity, either full-time or part-time rship (LLP)	
1: Give Details About You nin 4 years before you filed for boat A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. G	city State ZIP Code  ur Business or Connections to Any B  ankruptcy, did you own a business or have loyed in a trade, profession, or other active y company (LLC) or limited liability partne ging executive of a corporation e voting or equity securities of a corporation to to Part 12.  and fill in the details below for each busine	e any of the following connections to a ity, either full-time or part-time rship (LLP) on	any business?
1: Give Details About You nin 4 years before you filed for boat A sole proprietor or self-emp A member of a limited liability A partner in a partnership An officer, director, or manage An owner of at least 5% of the No. None of the above applies. Ges. Check all that apply above a	City State ZIP Code  ur Business or Connections to Any B  ankruptcy, did you own a business or have loyed in a trade, profession, or other activ y company (LLC) or limited liability partne ging executive of a corporation e voting or equity securities of a corporati so to Part 12.	e any of the following connections to a ity, either full-time or part-time rship (LLP) on	any business?
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1: Give Details About You in 4 years before you filed for both in 4 years before years and it is a partnership in 4 partnership in 5 An officer, director, or managed in 6 An owner of at least 5% of the No. None of the above applies. Given the company of the Above applies in 6 Partnership in 6 Partne	city State ZIP Code  ur Business or Connections to Any Business or Connections to Any Business or have an an arrade, profession, or other active year company (LLC) or limited liability partner ging executive of a corporation e voting or equity securities of a corporation of to Part 12.  and fill in the details below for each business Describe the nature of the business  Name of accountant or bookkeeper	e any of the following connections to a ity, either full-time or part-time rship (LLP)  on  ess.  Employer Identification Do not include Social S  EIN:  Dates business existed  From To  Employer Identification	number ecurity number or IT

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De	btor	1	

John Carnin Esposito

Case number (# known) 1:21-BK - 11098 (1/C

Name of accountant or bookkeeper   Dates business existed	Number Street  Name of accountant or bookkeeper  City State ZIP Code  n 2 years before you filed for bankruptcy, did you give a financial stateme utions, creditors, or other parties.  o es. Fill in the details below.  Date issued  Name MM / DD / YYYY	Dates business existed  From To
Name of accountant or bookkeeper    Date   Street	n 2 years before you filed for bankruptcy, did you give a financial stateme utions, creditors, or other parties.  O es. Fill in the details below.  Date issued  Name  MM / DD / YYYY	Dates business existed  From To
in 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial utions, creditors, or other parties.  In the details below.  Date issued  Name  MM / DD / YYYY  State ZiP Code  Sign Below  We read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the wers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fornection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  J.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2  Date  Over Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes	n 2 years before you filed for bankruptcy, did you give a financial stateme utions, creditors, or other parties.  o es. Fill in the details below.  Date Issued  Name MM / DD / YYYY	<del></del>
n 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial utions, creditors, or other parties.  O es. Fill in the details below.  Date issued  Name  MM / DD / YYYY  State ZIP Code  Sign Below  We read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the wers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by tonnection with a bankruptcy case can result in fines up to \$260,000, or imprisonment for up to 20 years, or both.  S.C. §8 152, 1341, 1619, and 3671.  Signature of Debtor 2  Signature of Debtor 2  Date  Dote  Dote  Dote  Dote  Dote  Over Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?  No Yes	n 2 years before you filed for bankruptcy, did you give a financial stateme utions, creditors, or other parties.  o es. Fill in the details below.  Date Issued  Name MM / DD / YYYY	nt to anyone about your business? Include all financial
Date Issued    Date Issued	Number Street	nt to anyone about your business? Include all financial
Date Issued    Name	Date issued  Name  MM / DD / YYYY  Number Street	
Date Issued    Date Issued   Date Issued	Date issued  Name  MM / DD / YYYY  Number Street	
Number Street  Sign Below  Veread the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the wers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by 1 ones concealing to the statement of the stateme	Date Issued  Name MM / DD / YYYY  Number Street	
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ver read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the wers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by to onnection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  J.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2  Date you attach additional pages to Your Statement of Financial Affairs for Individuals Filling for Bankruptcy (Official Form 107)?  No Yes	City State ZIP Code	
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wers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fonnection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  J.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2  Date  you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes	Sign Below	
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J.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 2  Date you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes	vers are true and correct. I understand that making a false statement, con	cealing property, or obtaining money or property by fra
Signature of Debtor 2  Date you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  No Yes	S.C. §§ 152, 1341, 1519, and 3571.	orisonment for up to 20 years, or both.
Date	4	
Date	*	
you attach additional pages to <i>Your Statement of Financial Affairs for Individuals Filing for Bankruptcy</i> (Official Form 107)?  No Yes	ignature of Debtor 1 Signature of Debtor 2	
you attach additional pages to <i>Your Statement of Financial Affairs for Individuals Filing for Bankruptcy</i> (Official Form 107)?  No Yes	1 - 1 - 1 a - 1	
No Yes	<del></del> -	_
Yes	ou attach additional pages to Your Statement of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
	No	
you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?	Yes	
you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?		
No Attach the Continue of Parker		t bankruptcy forms?
es. Name of person Attach the Bankruptcy Petition Preparer's Notice.  *Declaration, and Signature (Official Form 119)	es. warne of person	

Case 1:21-bk-11098-VK Doc 10 Filed 07/07/2		
Fill in this information to identify your c	8 0 Che one box only as directed in this form and in	
Debtor 1 John Corner Esporto	Form 122A-1Supp:	
Debtor 2	☐ 1. There is no presumption of abuse.	
(Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: _ Central District of California	2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A–2).	
Case number 1:21-BK-11098VK.	3. The Means Test does not apply now because of qualified military service but it could apply later.	f
	☐ Check if this is an amended filing	
Official Form 122A—1		
Chapter 7 Statement of Your Current N	Monthly Income 04	1/2
Be as complete and accurate as possible. If two married people are filing toge space is needed, attach a separate sheet to this form. Include the line number additional pages, write your name and case number (if known). If you believe to not have primarily consumer debts or because of qualifying military service (Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.  Part 1: Calculate Your Current Monthly Income	per to which the additional information applies. On the top of any	ou of
What is your marital and filling status? Check one only.		<del></del> .
Not married. Fill out Column A, lines 2-11.		
Married and your spouse is filing with you. Fill out both Columns A and	and B, lines 2-11.	
Married and your spouse is NOT filing with you. You and your spous	use are:	
Living in the same household and are not legally separated. Fill	ill out both Columns A and B, lines 2-11.	
Living separately or are legally separated. Fill out Column A, lines under penalty of perjury that you and your spouse are legally separat spouse are living apart for reasons that do not include evading the M	rated under nonbankruptcy law that applies or that you and your Means Test requirements. 11 U.S.C. § 707(b)(7)(B).	
Fill in the average monthly income that you received from all sources, do bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on Sep August 31. If the amount of your monthly income varied during the 6 months, a Fill in the result. Do not include any income amount more than once. For examincome from that property in one column only. If you have nothing to report for	derived during the 6 full months before you file this September 15, the 6-month period would be March 1 through s, add the income for all 6 months and divide the total by 6.	
	Column A Column B Debtor 1 Debtor 2 or non-filing spouse	
<ol><li>Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).</li></ol>	\$_0 \$8506.92	
Alimony and maintenance payments. Do not include payments from a spour Column B is filled in.	ouse if	
4. All amounts from any source which are regularly paid for household experience of you or your dependents, including child support. Include regular contribution an unmarried partner, members of your household, your dependents, part and roommates. Include regular contributions from a spouse only if Column B if filled in. Do not include payments you listed on line 3.	ributions	
5. Net income from operating a business, profession, or farm Debtor 1 Debtor 1	or 2	
Gross receipts (before all deductions) \$\$_		
Ordinary and necessary operating expenses - \$\$	-	
Net monthly income from a business, profession, or farm \$\$	\$\$	
6. Net income from rental and other real property Gross receipts (before all deductions)  Ordinary and necessary operating expenses  Debtor 1  \$  Debtor 2  \$  - \$	or 2	
Net monthly income from rental or other real property	Сору	
7. Interest, dividends, and royalties	here → \$ \$	

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ebt	or 1 John Canner First Name Middle Name Last Name	iposto o	Case number (if kno	( 1:21-BK-110	098Vic
			Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
8	Unemployment compensation		\$	\$	
	Do not enter the amount if you contend that the am	ount received was a benefit			
	under the Social Security Act. Instead, list it here:				
	For your spouse				
. a		T			
	Pension or retirement income. Do not include any benefit under the Social Security Act. Also, except a not include any compensation, pension, pay, annuit United States Government in connection with a disability, or death of a member of the uniformed se pay paid under chapter 61 of title 10, then include the does not exceed the amount of retired pay to which retired under any provision of title 10 other than cha	as stated in the next sentence, do y, or allowance paid by the ability, combat-related injury or revices. If you received any retired nat pay only to the extent that it you would otherwise be entitled if	\$	\$	
10	not include any benefits received under the Social S the Federal law relating to the national emergency of National Emergencies Act (50 U.S.C. 1601 et seq.) disease 2019 (COVID-19); payments received as a against humanity, or international or domestic terrori pay, annuity, or allowance paid by the United States disability, combat-related injury or disability, or death services. If necessary, list other sources on a separate	Specify the source and amount. Do becurity Act; payments made under declared by the President under the with respect to the coronavirus victim of a war crime, a crime sm; or compensation, pension, Government in connection with a to of a member of the uniformed			
			\$	\$	
			\$	<u> </u>	
	Total amounts from separate pages, if any.		+ \$	+ \$	
	Calculate your total current monthly income. Add column. Then add the total for Column A to the total process.  Determine Whether the Means Test.	for Column B.	\$	. * \$ =	Total current monthly income
12.	Calculate your current monthly income for the year	ar. Follow these steps:			
	12a. Copy your total current monthly income from li			Convilne 11 here	\$500 97
	Multiply by 12 (the number of months in a year			Sopy mie 11 fiele 🌌	\$ 2 7 C C
	12b. The result is your annual income for this part o	,			x 12
				12b.	\$ 102,083.
13.	Calculate the median family income that applies t	o you. Follow these steps:			
	Fill in the state in which you live.	Colitornia 2			
	Fill in the number of people in your household.	2			
	Fill in the median family income for your state and siz To find a list of applicable median income amounts, g instructions for this form. This list may also be availab	a online using the link specified in th	ne separate	13.	\$77,167
14.	How do the lines compare?				
	Line 12b is less than or equal to line 13. On t Go to Part 3. Do NOT fill out or file Official Fo	he top of page 1, check box 1, <i>There</i> orm 122A-2	e is no presump	xtion of abuse.	
,	Line 12b is more than line 13. On the top of p Go to Part 3 and fill out Form 122A–2.	rage 1, check box 2, <i>The presumptio</i>	on of abuse is d	etermined by Form 122A-2.	

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Debtor 1

John Canner Esposits
First Name Middle Name Last Name

Case number (if known) 1:21-8K-11678 VK

Part 3:

Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

Signature of Debtor

Signature of Debtor 2

Date 7 66 2021 MM / DD / YYYY

e MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

900	•	·	
Fill in this information to identify your case:		Check the appropriate b	ox as directed in
Debtor 1 John Cannon Esposito		According to the calculat	tions required by
Debtor 2		this Statement:	
(Spouse, if filing) First Name Middle Name Last Name  United States Bankruptcy Court for the: Central District of California		1. There is no presu	
Case number $\frac{\int 21-Bk-j109kvic}{100000000000000000000000000000000000$		2. There is a presum	ption of abuse.
(If known)		Check if this is an	amended filing
Official Form 122A–2			
Chapter 7 Means Test Calculation			04/40
To fill out this form, you will need your completed copy of Chapter 7 State	tement of Your Current	Monthly Income (Official For	04/19 m 1334 4)
Be as complete and accurate as possible. If two married people are filing is needed, attach a separate sheet to this form. Include the line number to pages, write your name and case number (if known).  Part 1: Determine Your Adjusted Income	together, both are equ	ally responsible for being an	ourata Ifmara anas
1. Copy your total current monthly income.	Copy line 11 from Offi	cial Form 122A-1 here →	85069°
2. Did you fill out Column B in Part 1 of Form 122A–1?			\$ <u>D 300</u>
No. Fill in \$0 for the total on line 3.			
Yes. Is your spouse filing with you?			
No. Go to line 3.			
Yes. Fill in \$0 for the total on line 3.			
Adjust your current monthly income by subtracting any part of your sphousehold expenses of you or your dependents. Follow these steps:	pouse's income not use	ed to pay for the	
On line 11, Column B of Form 122A–1, was any amount of the income you regularly used for the household expenses of you or your dependents?	reported for your spouse	NOT	
No. Fill in 0 for the total on line 3.			
Yes. Fill in the information below:			
State each purpose for which the income was used  For example, the income is used to pay your spouse's tax debt or to support people other than you or your dependents	Fill in the amount you are subtracting from your spouse's income		
	\$		
	\$		
	+\$		
Total	\$ <u> </u>	Copy total here→	-\$ <u>C</u>
Adjust your current monthly income. Subtract the test of the control of the contr			(en 92
Adjust your current monthly income. Subtract the total on line 3 from line	1.		1 4577 92

Debtor 1

Main Document JOHN CARMEN

1:21.BK-1109KV

Part 2:

**Calculate Your Deductions from Your Income** 

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not deduct any amounts that you subtracted from your spouse's income in line 3 and do not deduct any operating expenses that you subtracted from income in lines 5 and 6 of Form 122A-1.

If your expenses differ from month to month, enter the average expense.

Whenever this part of the form refers to you, it means both you and your spouse if Column B of Form 122A-1 is filled in.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

6. Food, clothing, and other items: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$<u>//083</u>

7. Out-of-pocket health care allowance: Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories—people who are under 65 and people who are 65 or older—because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

People who are under 65 years of age

7a. Out-of-pocket health care allowance per person

\$ \$55 5 V. 00

Number of people who are under 65

Subtotal. Multiply line 7a by line 7b.

Copy here

People who are 65 years of age or older

7d. Out-of-pocket health care allowance per person

Number of people who are 65 or older

Subtotal. Multiply line 7d by line 7e.

Copy here

Total. Add lines 7c and 7f.....

\$\_\_\_\_\_\_\_Copy total here

Debtor 1	John First Name	CANMEN I	Main Documei	nt Page 53 —	Of 67 Case number	(if known) /: 21-	13K-11098 VK
Local S	Standards \	ou must use the IR	S Local Standards to a	nswer the questions	in lines 8-15.		
Based bankru	on information t	from the IRS, the U	.S. Trustee Program	has divided the IRS	Local Stand	ard for housing for	
■ Hous	sing and utilitie	s – Insurance and e s – Mortgage or rei	operating expenses nt expenses				
To ansv	wer the question	ns in lines 8-9, use	the U.S. Trustee Prog	gram chart.			
To find t	the chart, go onli		cified in the separate i	=	orm.		
8. <b>Hou</b> dolla	sing and utilitie r amount listed fo	s – Insurance and or your county for in	operating expenses: surance and operating	Using the number of expenses.	people you er	ntered in line 5, fill in th	ne \$ 532 ES
9. Hous	sing and utilitie	s – Mortgage or rei	nt expenses:				
9a. U fo	Jsing the number or your county fo	of people you enter r mortgage or rent e	red in line 5, fill in the d xpenses	lollar amount listed		\$ 1975	
9b. T	otal average mo	nthly payment for all	mortgages and other	debts secured by you	ur home.		
C	o calculate the to ontractually due ankruptcy. Then	to each secured cre-	payment, add all amo ditor in the 60 months a	unts that are after you file for			
	Name of the cred	itor		Average monthly payment			
	DANK .	E AMENICA	<u> </u>	\$ 3/95.5	<b>10</b>		
	inells	FAMONICA FAMO		\$ 1576.8	2.		
				+ \$ 4772.3	2		
		Total average	monthly payment	\$ <u>4772.3</u> 2	Copy here →	-\$ <u>4772</u> 32R a lii	depeat this mount on ne 33a.
9c. 1	Net mortgage or i	rent expense.			ļ.··	otter til till skalaringar – kyrk höpsand stögligberer utgema ellar a savagsangsgag	
s r	Subtract line 9b (rent expense). If t	total average month this amount is less th	<i>ly payment</i> ) from line 9 nan \$0, enter \$0	a (mortgage or			opy \$ <u>27973</u> ℃
10. <b>If you</b>	claim that the l	J.S. Trustee Progra	ım's division of the IF	RS Local Standard t	for housing is	incorrect and affect	te o
the ca Expla	iculation of you	ir monuny expense	es, till in any addition	al amount you clair	n.	moon oot and arrea	<u> </u>
why:							<del>-</del>
11. Locati	transportation e	expenses: Check th	e number of vehicles fo	or which you claim a	n ownership o	r onerating evnence	
□ 0.	. Go to line 14.			•			
	. Go to line 12. or more. Go to li	no 12					
<b>L</b> 2	of more. Go to h	He 12.					
12. <b>Vehicl</b> operati	e operation exp ing expenses, fill	ense: Using the IRS in the Operating Co	S Local Standards and sts that apply for your	the number of vehicl Census region or me	les for which y etropolitan stat	ou claim the istical area.	\$ <u>266.</u> e.

Case 1:21-bk-11098-VK Doc 10 Filed 07/07/21 Entered 07/07/21 10:05:10 Desc

Debtor 1	Case 1	1.21-DK	LIU98-VI MANGA	Main Do	<i>o</i> ume		54 of 67	0 07/07/21 10:07 7 umber (if known)		
	TH'S MAIN	rre ivildo.	enane	Last Name						
10	or each ven	icle below. '	rou may not α	e: Using the IRS claim the expense pense for more the	e if vou do	o not make anv	ate the net ow loan or lease	nership or lease expen payments on the vehic	se cle.	
V	/ehicle 1	Describe V	'ehicle 1: _	1973	Ponsc	hx 91	/		-	
1	3a. Owner	rship or leas	ing costs usir	ng IRS Local Star	dard			\$ 26600	<del>-</del>	
1			payment for a sts for leased	Il debts secured by vehicles.	y Vehicle	e 1.				
	amour	nts that are o	contractually o	ily payment here a due to each secur hen divide by 60.	and on lir ed credit	ne 13e, add all or in the 60 mo	nths			
	Na	me of each o	reditor for Vel	nicle 1	Avera paym	age monthly ent				
					\$_ <b>+</b> \$	0				
		То	tal average m	onthly payment	\$_	0	Copy here	- \$ <u></u>	Repeat this amount on line 33b.	
13			rship or lease om line 13a. l	expense f this amount is le	ss than \$	60, enter \$0		s 266 ro	Copy net Vehicle 1 expense here	<u> 266°</u>
Ve	ehicle 2	Describe Ve	ehicle 2:							
13	d. Owners	ship or leasi	ng costs using	g IRS Local Stand	lard			\$		
13			ayment for all s for leased v	debts secured by ehicles.	/ Vehicle	2.				
	Nan	ne of each cr	editor for Veh	icle 2	Avera payme	ge monthly ent				
	٠	· · · · · · · · · · · · · · · · · · ·			\$					
					+ \$_					
		То	tal average m	onthly payment	\$		Copy here→	- \$	Repeat this amount on line 33c.	
13f			ship or lease m 13d. If this	expense amount is less tha	an \$0, en	ter \$0		\$	Copy net Vehicle 2 expense here	\$
14. <b>Pul</b> <i>Pul</i> .	blic transpo	ortation expe	pense: If you ense allowand	claimed 0 vehicle ce regardless of w	s in line hether yo	11, using the IF ou use public tr	RS Local Standars	dards, fill in the	ı	\$
ueu	iuci a public	ctransportat	ion expense.	ense: If you claim you may fill in wh ublic Transportati	at you be	nore vehicles in elieve is the app	line 11 and if propriate expe	you claim that you may ense, but you may not c	/ also claim	\$

Case 1:21-bk-11098-VK Doc 10 Filed 07/07/21 Entered 07/07/21 10:05:10 Desc Main Document Page 55 of 67 Case number (# known) 1:21-BK-11098V/K Debtor 1 Other Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as income taxes, selfemployment taxes, Social Security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or ■ for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.

is not reimbursed by your employer.

Add lines 6 through 23.

24. Add all of the expenses allowed under the IRS expense allowances.

23. Optional telephones and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it

Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deducted.

Case 1:21-bk-11098-VK Doc 10 Filed 07/07/21 Entered 07/07/21 10:05:10 Desc Main Document Page 56 of 67 Case number (# known) 1 21 - BK - 11098 VK CARMEN Debtor 1 **Additional Expense Deductions** These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. 706.94 Health insurance Disability insurance Health savings account Total Copy total here Do you actually spend this total amount? No. How much do you actually spend? 26. Continuing contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential. 28. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary. 29. Education expenses for dependent children who are younger than 18. The monthly expenses (not more than \$170.83\* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school. You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23. Subject to adjustment on 4/01/22, and every 3 years after that for cases begun on or after the date of adjustment. 30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary.

Official Form 122A-2

31. Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial

instruments to a religious or charitable organization. 26 U.S.C. § 170(c)(1)-(2).

32. Add all of the additional expense deductions.

Add lines 25 through 31.

CAN MEN Last Name

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OT 6 / Case number of known 1:21-1314 - 11098 VIC

### **Deductions for Debt Payment**

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

	Mortgages on your home:				Average me payment	entin <b>y</b>	
33a.	Copy line 9b here				\$ 47	72.32	
	Loans on your first two ve	hicles:					
33b.	Copy line 13b here				\$	3	
33c.	Copy line 13e here			<b>→</b>	\$ <u> </u>	<u> </u>	
33d.	List other secured debts:						
	Name of each creditor for ot secured debt	her Identify prope secures the de	ebt in	oes payment clude taxes r insurance?			
				□ No □ Yes	\$C	)	; ;
				☐ No ☐ Yes	\$ <u> </u>	)	
	•			□ No □ Yes	+ \$	<del></del>	
33e. T	otal average monthly payment	. Add lines 33a through 33	id		\$ 477	2.32 Copy total	:477232
	ny debts that you listed in li her property necessary for y						
or ot	her property necessary for y o. Go to line 35. es. State any amount that you	our support or the su	ort of your depen	dents? ments			
or oth	o. Go to line 35. es. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	must pay to a creditor, in seession of your property in the information below.	ort of your depen addition to the pay (called the <i>cure an</i>	dents? ments	Mandali		
or oti	o. Go to line 35. es. State any amount that you listed in line 33, to keep po	must pay to a creditor, in a	ort of your depen	dents? ments nount).	Monthly cu amount	ıre	
or oti	o. Go to line 35. es. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	must pay to a creditor, in seession of your property in the information below.	ort of your depen addition to the pay (called the <i>cure an</i> Total cure	dents? ments		ıre	
or oti	o. Go to line 35. es. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	must pay to a creditor, in seession of your property in the information below.	ort of your depen addition to the pay (called the <i>cure an</i> Total cure	dents? ments nount).		ıre 	
or oth	o. Go to line 35. es. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	must pay to a creditor, in seession of your property in the information below.	ort of your depen addition to the pay (called the <i>cure an</i> Total cure	ments nount).  + 60 =		ire	
or ot	o. Go to line 35. es. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	must pay to a creditor, in seession of your property in the information below.	ort of your depen addition to the pay (called the <i>cure an</i> Total cure	ments nount). + 60 = + 60 =		Copy total	\$
or oth	o. Go to line 35. es. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in Name of the creditor	must pay to a creditor, in seession of your property the information below.  Identify property that secures the debt	addition to the pay (called the <i>cure an</i> Total cure amount  \$ \$	ments nount).  + 60 = + 60 =  + 60 =  Total			\$
Do you that a	o. Go to line 35. es. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in Name of the creditor	must pay to a creditor, in seession of your property the information below.  Identify property that secures the debt	addition to the pay (called the <i>cure an</i> Total cure amount  \$ \$	ments nount).  + 60 = + 60 =  + 60 =  Total			\$
Do you that a	o. Go to line 35. es. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in Name of the creditor	must pay to a creditor, in a ssession of your property in the information below.  Identify property that secures the debt  ach as a priority tax, child ate of your bankruptcy of these priority claims.	addition to the pay (called the cure an  Total cure amount  \$ \$  \$  d support, or alim ase? 11 U.S.C. §	ments nount).  + 60 = + 60 = Total  nony 507.			\$

Debtor 1	First Name Middle Name Last Name	ocuptent Page 5	BOT 67 Case nun,⊷∠r(#kr	1.21-BK-1	1098VK
For	you eligible to file a case under Chapter 13 more information, go online using the link for Eructions for this form. Bankruptcy Basics may a	Bankruptov Basics specified in t	he separate		
	o. Go to line 37.	and the second s	noy ofcired office.		
	es. Fill in the following information.				
	Projected monthly plan payment if you wer	re filing under Chapter 13	\$		
	Current multiplier for your district as stated Administrative Office of the United States ( North Carolina) or by the Executive Office other districts).	Courts (for districts in Alahama	all		
	To find a list of district multipliers that inclu- link specified in the separate instructions for available at the bankruptcy clerk's office.	des your district, go online usin or this form. This list may also b	g the e		
	Average monthly administrative expense if	you were filing under Chapter	13 \$	Copy total here	\$
37. <b>Add a</b> Add lii	II of the deductions for debt payment. nes 33e through 36				\$_ <i>O</i> _
Total Dec	luctions from Income				
38. Add a	l of the allowed deductions.				
	ne 24, All of the expenses allowed under IRS e allowances	\$ 6305 32			
Copy li	ne 32, All of the additional expense deductions.	s 2321.9Y			
il vao2	ne 37, All of the deductions for debt payment	<b>+</b> ° (7)			
- <b>[- ]</b>	Total deducti	011-01	Convetatelle	re• \$	C1 27 21
Part 3:	Determine Whether There Is a Presu		oopy total ne	<b>→</b> \$	5621.21
39. Calcul	ate monthly disposable income for 60 mont				
	Copy line 4, adjusted current monthly income	0			
39b. (	Copy line 38, Total deductions	- \$ 86 27. 2C			
	Monthly disposable income. 11 U.S.C. § 707(b) Subtract line 39b from line 39a.	(2). \$-170,34	Copy here	\$-120.34	
:	For the next 60 months (5 years)			x 60	
39d. <b>T</b>	otal. Multiply line 39c by 60			\$ -722c. (Ccopy	\$-72204C
40. Find ou	t whether there is a presumption of abuse.	Check the how that applica-		į	<del></del>
	line 39d is less than \$8,175*. On the top of pa	• •	, There is no presu	mption of abuse. Go to	:
☐ The	line 39d is more than \$13,650*. On the top of fill out Part 4 if you claim special circumstance	page 1 of this form, check how			• • •
	line 39d is at least \$8,175*, but not more tha	-			
	ubject to adjustment on 4/01/22, and every 3 years		or after the date o	f adjustment.	

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·		•	BK-110	
41. 41a. Fill in the amount of your total nonpriority unsecured debt. I Summary of Your Assets and Liabilities and Certain Statistical In (Official Form 106Sum), you may refer to line 3b on that form	formation Schedules	•		
		\$x .25	<del></del>	
41b. 25% of your total nonpriority unsecured debt. 11 U.S.C. § 70 Multiply line 41a by 0.25.		. \$	Copy here→	\$
2. Determine whether the income you have left over after subtracting is enough to pay 25% of your unsecured, nonpriority debt. Check the box that applies:	all allowed deductions		_	
Line 39d is less than line 41b. On the top of page 1 of this form, of Go to Part 5.	heck box 1, <i>There is no pres</i>	umption of abuse	<b>.</b>	
Line 39d is equal to or more than line 41b. On the top of page 1 of abuse. You may fill out Part 4 if you claim special circumstances	of this form, check box 2, <i>The</i> Then go to Part 5.	ere is a presumpt	tion	
	, and the second			
4: Give Details About Special Circumstances				
o you have any special circumstances that justify additional expensionable alternative? 11 U.S.C. § 707(b)(2)(B).	es or adjustments of curren	it monthly incor	ne for which th	ere is no
No. Go to Part 5.				
No. Go to Part 5.  Yes. Fill in the following information. All figures should reflect your aver for each item. You may include expenses you listed in line 25.	age monthly expense or inco	me adjustment		
Yes. Fill in the following information. All figures should reflect your aver	that make the expenses or in	ncome		
Yes. Fill in the following information. All figures should reflect your aver for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances adjustments necessary and reasonable. You must also give your of the special circumstances.	that make the expenses or in	ncome	hly expense ustment	
Yes. Fill in the following information. All figures should reflect your aver for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances adjustments necessary and reasonable. You must also give your dexpenses or income adjustments.	that make the expenses or in	ncome f your actual Average mont	hly expense ustment	
Yes. Fill in the following information. All figures should reflect your aver for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances adjustments necessary and reasonable. You must also give your dexpenses or income adjustments.	that make the expenses or in	ncome f your actual Average mont	hly expense ustment	
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for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances adjustments necessary and reasonable. You must also give your cexpenses or income adjustments.	that make the expenses or in	ncome f your actual Average mont	hly expense ustment	
Yes. Fill in the following information. All figures should reflect your aver for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances adjustments necessary and reasonable. You must also give your dexpenses or income adjustments.  Give a detailed explanation of the special circumstances  Sign Below	that make the expenses or in ase trustee documentation o	Average mont or income adj	ustment	ant.
Yes. Fill in the following information. All figures should reflect your aver for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances adjustments necessary and reasonable. You must also give your dexpenses or income adjustments.  Give a detailed explanation of the special circumstances  Sign Below  By signing here, I declare under penalty of perjury that the informat	that make the expenses or in ase trustee documentation o	Average mont or income adj	ustment	ect.
Yes. Fill in the following information. All figures should reflect your aver for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances adjustments necessary and reasonable. You must also give your dexpenses or income adjustments.  Give a detailed explanation of the special circumstances	that make the expenses or in ase trustee documentation of the following of the following trustees are trusteed or in a section of the following trustees are trusteed or in a section of the following trustees are trusteed in a section of the following trustees are trusteed as the following t	Average mont or income adj	ustment	ect.
Yes. Fill in the following information. All figures should reflect your aver for each item. You may include expenses you listed in line 25.  You must give a detailed explanation of the special circumstances adjustments necessary and reasonable. You must also give your dexpenses or income adjustments.  Give a detailed explanation of the special circumstances  Sign Below  By signing here, I declare under penalty of perjury that the informat	that make the expenses or in ase trustee documentation o	Average mont or income adj	ustment	ect.

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Fill in this information to identify your ca	21 Entered 07/07/21 10:05:10 Desc
Debtor 1  First Name  Middle Name  Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: District of	
Case number 1:21-BK - 11098 VK	
(if known)	
	☐ Check if this is an amended filing
Official Form 122A—1Supp	
Statement of Exemption from Presumpt	ion of Abuse Under § 707(b)(2) 12/15
File this supplement together with Chapter 7 Statement of Your Current Mont exempted from a presumption of abuse. Be as complete and accurate as pose exclusions in this statement applies to only one of you, the other person should be a supplementary of the contract of t	hly Income (Official Form 122A-1), if you believe that you are
required by 11 U.S.C. § 707(b)(2)(C).	and complete a separate Form 122A-1 if you believe that this is
Part 1: Identify the Kind of Debts You Have	
<ol> <li>Are your debts primarily consumer debts? Consumer debts are defined in 11 personal, family, or household purpose." Make sure that your answer is consister Individuals Filing for Bankruptcy (Official Form 101).</li> </ol>	U.S.C. § 101(8) as "incurred by an individual primarily for a it with the answer you gave at line 16 of the <i>Voluntary Petition for</i>
Children in the same apicy (Children to the 101).	
No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, <i>Ther</i> submit this supplement with the signed Form 122A-1.	e is no presumption of abuse, and sign Part 3. Then
Yes. Go to Part 2.	
Part 2: Determine Whether Military Service Provisions Apply to You	I :
2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))2	
2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?	
No. Go to line 3.	
- · · · · ·	
<ul><li>☐ No. Go to line 3.</li><li>☐ Yes. Did you incur debts mostly while you were on active duty or while you we</li></ul>	
□ No. Go to line 3. □ Yes. Did you incur debts mostly while you were on active duty or while you we 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).	re performing a homeland defense activity?
<ul> <li>No. Go to line 3.</li> <li>Yes. Did you incur debts mostly while you were on active duty or while you were 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).</li> <li>No. Go to line 3.</li> <li>Yes. Go to Form 122A-1; on the top of page 1 of that form, check box Then submit this supplement with the signed Form 122A-1.</li> </ul>	re performing a homeland defense activity?
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<ul> <li>No. Go to line 3.</li> <li>Yes. Did you incur debts mostly while you were on active duty or while you were 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).</li> <li>No. Go to line 3.</li> <li>Yes. Go to Form 122A-1; on the top of page 1 of that form, check box Then submit this supplement with the signed Form 122A-1.</li> <li>Are you or have you been a Reservist or member of the National Guard?</li> <li>No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Were you called to active duty or did you perform a homeland defense active duty or did</li></ul>	re performing a homeland defense activity?  1, There is no presumption of abuse, and sign Part 3.
<ul> <li>No. Go to line 3.</li> <li>Yes. Did you incur debts mostly while you were on active duty or while you were 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).</li> <li>No. Go to line 3.</li> <li>Yes. Go to Form 122A-1; on the top of page 1 of that form, check box Then submit this supplement with the signed Form 122A-1.</li> <li>Are you or have you been a Reservist or member of the National Guard?</li> <li>No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Were you called to active duty or did you perform a homeland defense active line in the property of the National Guard?</li> <li>No. Complete Form 122A-1. Do not submit this supplement.</li> </ul>	re performing a homeland defense activity?  1, There is no presumption of abuse, and sign Part 3.
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<ul> <li>No. Go to line 3.</li> <li>Yes. Did you incur debts mostly while you were on active duty or while you were 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).</li> <li>No. Go to line 3.</li> <li>Yes. Go to Form 122A-1; on the top of page 1 of that form, check box Then submit this supplement with the signed Form 122A-1.</li> <li>Are you or have you been a Reservist or member of the National Guard?</li> <li>No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Were you called to active duty or did you perform a homeland defense active No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Check any one of the following categories that applies:</li> <li>I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.</li> </ul>	tivity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).  If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and
<ul> <li>No. Go to line 3.</li> <li>Yes. Did you incur debts mostly while you were on active duty or while you were 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).</li> <li>No. Go to line 3.</li> <li>Yes. Go to Form 122A-1; on the top of page 1 of that form, check box Then submit this supplement with the signed Form 122A-1.</li> <li>Are you or have you been a Reservist or member of the National Guard?</li> <li>No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Were you called to active duty or did you perform a homeland defense active in the supplement.</li> <li>Yes. Check any one of the following categories that applies:</li> <li>I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.</li> <li>I was called to active duty after September 11, 2001, for at least</li> </ul>	tivity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).  If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, <i>The Means Test does not apply now</i> , and sign Part 3. Then submit this supplement with the signed
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<ul> <li>No. Go to line 3.</li> <li>Yes. Did you incur debts mostly while you were on active duty or while you we 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).</li> <li>No. Go to line 3.</li> <li>Yes. Go to Form 122A-1; on the top of page 1 of that form, check box Then submit this supplement with the signed Form 122A-1.</li> <li>Are you or have you been a Reservist or member of the National Guard?</li> <li>No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Were you called to active duty or did you perform a homeland defense active in No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Check any one of the following categories that applies:</li> <li>I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.</li> <li>I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on</li></ul>	It you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The
<ul> <li>No. Go to line 3.</li> <li>Yes. Did you incur debts mostly while you were on active duty or while you were 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).</li> <li>No. Go to line 3.</li> <li>Yes. Go to Form 122A-1; on the top of page 1 of that form, check box Then submit this supplement with the signed Form 122A-1.</li> <li>Are you or have you been a Reservist or member of the National Guard?</li> <li>No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Were you called to active duty or did you perform a homeland defense active.</li> <li>No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Check any one of the following categories that applies:</li> <li>I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.</li> <li>I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on, which is fewer than 540 days before I file this bankruptcy case.</li> <li>I am performing a homeland defense activity for at least 90 days.</li> </ul>	It you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period means the time you are on active duty
<ul> <li>No. Go to line 3.</li> <li>Yes. Did you incur debts mostly while you were on active duty or while you we 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).</li> <li>No. Go to line 3.</li> <li>Yes. Go to Form 122A-1; on the top of page 1 of that form, check box Then submit this supplement with the signed Form 122A-1.</li> <li>Are you or have you been a Reservist or member of the National Guard?</li> <li>No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Were you called to active duty or did you perform a homeland defense active in No. Complete Form 122A-1. Do not submit this supplement.</li> <li>Yes. Check any one of the following categories that applies:</li> <li>I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.</li> <li>I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on</li></ul>	It you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, The Means Test does not apply now, and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The

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Fill in this inf	ormation to ide	ntify your case:		
Debtor 1	John (	ARMEN E	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	sankruptcy Court fo	r the: Central District of Ca	lifornia	
Case number (if known)	1:21-BK	-11098 V K		

Check if this is an amended filing

### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

<ol> <li>For any creditors that you listed in Part 1 of Schedule D: 0 information below.</li> </ol>	Creditors Who Have Claims Secured by Property (Offici	ial Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's Bank of America name:  Description of Home securing debt: 23061 Strathern Ja	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	□ No ▶ Yes
Creditor's name: WELLS FANGO  Description of 2nd montgage property securing debt: Home 23061 Stnathmen	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	□ No ☑Yes
Creditor's name: Espo RESto  Description of property securing debt: 73 ponschiz 911	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	☐ No ☐ Yes
Creditor's name:  Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes

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Debtor 1

John CAMEN Esposite
First Name Middle Name Last Name

Case number (If known) 1.21-BK - 11098 VK

Part 2:

**List Your Unexpired Personal Property Leases** 

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106	(G)
fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet	et
ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).	

Describe your unexpired personal property leas	es	Will the lease be assumed?
essor's name:		☐ No
		☐ Yes
escription of leased roperty:		<b>—</b> 163
essor's name:		□ No
escription of leased roperty:		Yes
essor's name:		□ No
escription of leased roperty:		☐ Yes
essor's name:		□ No
escription of leased operty:		☐ Yes
essor's name:		□ No
escription of leased operty:		☐ Yes
essor's name:		□ No
escription of leased operty:		☐ Yes
ssor's name:		□ No
scription of leased		Yes
pperty:		
3: Sign Below		
<b></b>		
ler penalty of perjury, I declare that I have ind sonal property that is subject to an unexpired	licated my intention about any property of I lease.	my estate that secures a debt and any
	×	
nature of Debtor 1	Signature of Debtor 2	The second secon
late to as		

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10	Desc

12/15

Fill in this in	formation to	identify your case:		
Debtor 1	Jchn First Name	CARMEN Middle Name	Espos to Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Cour	t for the:	_ District of	
Case number	1:21-1	8K-11098 V	<u> </u>	

### Official Form 101B

## Statement About Payment of an Eviction Judgment Against You

Fill out this form only if:

- 83 you filed Initial Statement About an Eviction Judgment Against You (Official Form 101A); and
- you served a copy of Form 101A on your landlord; and
- you want to stay in your rented residence for more than 30 days after you file your Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101).

File this form within 30 days after you file your Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101). Also serve a copy on your landlord within that same time period.

# **Certification About Applicable Law and Payment of Eviction Judgment** I certify under penalty of perjury that (Check all that apply): Under the state or other nonbankruptcy law that applies to the judgment for possession (eviction judgment), I have the right to stay in my residence by paying my landlord the entire delinquent amount. Within 30 days after I filed my Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101), I have paid my landlord the entire amount I owe as stated in the judgment for possession (eviction judgment). X Signature of Debtor 2 MM / ממ

You must serve your landlord with a copy of this form.

Check the Bankruptcy Rules (www.uscourts.gov/rulesandpolicies/rules.aspx) and the court's local website (go to http://www.uscourts.gov/Court\_Locator.aspx\_ to find your court's website) for any specific requirements that you might have to meet to serve this statement.

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
JOHN CAMEN Esposito 23061 STRATHERN ST	
23061 Steathern ST	
WEST Hills, CA. 91304	
818-469-1811	
Espoporsche @ynhoo.com	
Debtor(s) appearing without attorney  Attorney for Debtor	
UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA -**SELECT DIVISION**	
In re:	CASE NO .: 1.21-0K-11098 VK
John CARMEN Egyposito	CHAPTER: 7
John Chitain P ffen.	
	VERIFICATION OF MASTER
	MAILING LIST OF CREDITORS
	[LBR 1007-1(a)]
Debtor(s).	
Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under	
penalty of perjury that the master mailing list of cre	editors filed in this bankruptcy case, consisting of
sheet(s) is complete, correct, and consistent versponsibility for errors and omissions.	with the Debtor's schedules and I/we assume all
responsibility for errors and ormssions.	
-1/6-	
Date: 7/6/2021	Signature of Debtor 1
/ /	Olgitada Ol Debiol I
Date:	
	Signature of Debtor 2 (joint debtor) (if applicable)

Signature of Attorney for Debtor (if applicable)

Date:

American Express
P. O. Box 0001
Los Angeles, CA 90096-8000

Bank of America P. O. Box 31785 Tampa, FL 33631-3785

Shawn S. Dargahi, Esq. 15760 Ventura Boulevard, Suite 2060 Encino, CA 91436

EDD
San Bernardino Collection Office
658 E. Brier Dr., Suite 300
San Bernardino, CA 92408—2847

Mark and Gordon Murphy Attorney: Matthew J. Negrin 12400 Wilshire Boulevard, Suite 1180 Los Angeles, CA 90025

Osprey Realty Partners 7100 Hayvenhurst Avenue, Suite 211 Van Nuys, CA 91406

Robnina Industries, Inc. Benjamin Chaise and Associates Collectors 6520 Platt Avenue # 663 West Hills, CA 91307 Silviano C Quezada 653 Urdemont Circle Simi Valley, CA Raymer Investments

Raymer Investments 7100 Hayvenhurst Avenue, Suite 211 Van Nuys, CA 91406

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